

Summer 2001

# Seventh Biennial Statewide Survey of Drug and Alcohol Use Among California Students in Grades 7, 9 and 11

California Attorney General's Office

Gregory Austin Ph.D.

Rodney Skager Ph.D.

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# Seventh BIENNIAL

**Statewide Survey of  
Drug and Alcohol Use  
Among California Students  
in Grades 7, 9 and 11**

NON-CIRCULATING

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22  
.J150  
D78  
Winter  
1997-98

Summer 2001

California Attorney General's Office  
Gregory Austin and Rodney Skager



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SEVENTH BIENNIAL

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# Statewide Survey of Drug and Alcohol Use Among California Students in Grades 7, 9 and 11

Gregory Austin, Ph.D.  
and  
Rodney Skager, Ph.D.

Jointly sponsored by  
California Attorney General's Office  
California Department of Education  
Department of Alcohol and Drug Programs  
Department of Health Services

Winter 1997 - 1998

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*The opinions, findings, and conclusions  
in this publication are those of the authors  
and not necessarily those of the State agencies.*

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# Foreword

**W**e all want our children to grow up healthy and drug-free — and to be safe at home and school. Our job is to help California's diverse communities provide safe homes and schools so our children can achieve and excel.

My immediate priority is to support our children — they need our help. Today's youth are facing life-altering challenges, and many are not equipped with the maturity or skills to make healthy choices. Too many teens start drinking, succumbing to peer pressure, multi-million dollar TV beer ads or other influences — making alcohol the most widely used illicit substance by youth. Alcohol's popularity is confirmed by our 1997-98 *Seventh Biennial Statewide Survey of Drug and Alcohol Use Among California Students in Grades 7, 9 and 11*. The survey found that almost half of 7<sup>th</sup>-, two-thirds of 9<sup>th</sup>- and three-quarters of 11<sup>th</sup>-grade students reported drinking in the six months prior to the survey. In addition, a significant number (20%) of 11<sup>th</sup> graders reported *weekly* drinking.

Another disturbing survey finding is that one-third of 11<sup>th</sup> graders have been involved in drinking and driving. This information should motivate state and local policymakers to do more to curb youths' alcohol use. Also, drunk driving is not the only risk that teens face with alcohol use. According to a 1998 report by the U.S. Department of Justice's Bureau of Justice Statistics (BJS), almost 4 in 10 violent crimes involve alcohol, as do 4 in 10 fatal motor vehicle accidents.

But we have faith in our youth. Some heard the prevention message and changed their behavior. The findings from the *Seventh Biennial Statewide Survey* indicate small to moderate increases in students abstaining from alcohol or other drug use in the six months before the survey.

We know what works — long-term prevention strategies and programs that help our youth make the right choices. Information from the *Seventh Biennial Statewide Survey* can help state leaders and educators direct their prevention efforts more effectively.

Joining us in these efforts are survey cosponsors: Delaine Eastin, Superintendent of Public Instruction, California Department of Education; the Department of Alcohol and

Drug Programs; and the Department of Health Services. Our thanks go to them for their long-time support of the survey. Special thanks goes to the school administrators, teachers, parents and especially the students for their participation in this important endeavor which benefits all young people in California.

California Attorney General's Office



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**W**e are indebted to Attorney General Bill Lockyer for his support of this survey and his recognition of the importance of ongoing monitoring of alcohol, tobacco, and other drug use by California youth as a guide to prevention and intervention efforts.

Support also was provided by the California Department of Alcohol and Drug Programs; the California Department of Education, Healthy Kids Program Office; and the Department of Health Services, Office of AIDS.

In the Office of the Attorney General, we wish to acknowledge the work of the Crime and Violence Prevention Center, especially by Daphne Hom, Project Coordinator; Kathy Jett, Director of the Crime and Violence Prevention Center; and Nancy Matson, Assistant Director. We also received invaluable advice from Dorothy Torres in the Department of Alcohol and Drug Programs and from Greg Wolfe, Jana Kay Slater, Myra Young, and Dr. Gerald H. Kilbert, in the California Department of Education; and Dr. Richard Sun, Department of Health Services.

This project would not have been possible without the cooperation of the school superintendents, principals, and teachers. Their commitment and professionalism have made this survey a reality once again.

At WestEd, Kiku Annon, Kathleen Curry, and Christina Gikas supervised the survey administration. Ms. Annon also maintained the project database and assisted in school liaison and report preparation. Jerry Bailey provided invaluable assistance in the planning and data analysis. Patricia Winget, Elissa Provance, and Sandra Cosner also are to be recognized for their editorial and graphic design support.

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# Preface

**I**n this report, information is presented on prevalence, levels, and patterns of substance use, as well as attitudes (perceived harm), social context (availability and adult use), and related problems. Section 1 of this report summarizes the survey's purpose, methods, and the sample characteristics. The presentation of the survey findings is organized around drug categories. In Sections 2 and 3, the specific results for alcohol and drugs, respectively, are reported. This includes information on prevalence, levels and patterns of use, attitudes (perceived harm), social context (availability and adult use), and related problems. Section 4 more broadly discusses results relating to the overall level of alcohol and other drug (AOD) use, including two summary indexes on high-risk drug use and excessive alcohol use. It also provides results for specific high-risk behaviors such as polydrug use and attending school "high." Section 5 discusses exposure to AOD prevention and intervention efforts. Section 6 focuses on tobacco use and covers all the above areas. Finally, the overall implications of the study are discussed in Section 7.

The survey was conducted in the late fall and winter of the 1997-98 school year. For the sake of convenience, it is referred to as the 1997 California Student Survey (CSS), because most students took the survey before the end of that year and the questionnaire asked about past behavior. Prior surveys by the odd-numbered year are also referenced.

For the most part, comparisons of the current results are limited to those of the immediately preceding survey in 1995. As explained in Section 1, this is because of changes that began that year in the survey methodology, notably the switch to written parent consent. However, results in the context of long-term trends are also reviewed. Appendix A presents supplementary tables with the results for all survey administrations. Percentages in the tables include values of tenths of one percent. In the narrative text, rates were rounded to the nearest whole number, except at the midpoint (0.5).

The abbreviation *AOD* refers to alcohol and other drugs. The term *drug* by itself refers to psychoactive substances other than alcohol and tobacco. Unless explicitly specified otherwise, discussions of substance use do not include tobacco and generally refer to use in the six months prior to the survey administration, the measure for which trend data is available since 1985. *Lifetime* use refers to ever having used or tried a drug (even once.) *Current use* refers to the 30 days prior to the survey.

## ABBREVIATIONS AND DEFINITIONS

### **Surveys**

CSS	California Student Survey of Substance Use (also known as the <i>Biennial Statewide Survey of Drug and Alcohol Use Among California Students</i> and the <i>Attorney General's Survey</i> ).
MTF	The national Monitoring the Future Survey, sponsored by the National Institute of Drug Abuse, and the oldest national survey of student drug use; conducted annually.

### **Drugs and Drug-Related Behaviors**

AOD (ATOD)	Alcohol (tobacco) and other drugs.
Alcoholic Drink	One can/bottle of beer or wine cooler, glass of wine, mixed drink, or short glass of distilled spirits (liquor).
Binge Drinking	Refers to consuming five drinks or more in a row on the same occasion in the two weeks prior to the survey. Also referred to as episodic or occasional heavy drinking.
Cigarettes	Refers only to tobacco smoking.
Drugs	In this report, refers to psychoactive substances other than alcohol or tobacco, such as marijuana.
Inhalants	Drugs that you "sniff" or "huff" to get high, such as glue, gasoline, paint fumes, aerosol sprays, and poppers.
Methamphetamines	Refers to crystal meth, speed, ice, crank, or any amphetamine.
Polydrug Use	Use of two or more different drugs on the same occasion. Measured for the past six months.
Smokeless Tobacco	Chew or snuff, such as Redman, Levi Garrett, Beechnut, Skoal, Bandits, or Copenhagen.

### **ATOD Use Prevalence Measures**

Six-Month Prevalence	Any use six months prior to the survey.
Lifetime Prevalence	Any use over respondent's lifetime (i.e., ever used).
Current Prevalence	Any use 30 days prior to the survey.
Weekly Use	Once a week or more often, calculated based on the frequency of use in the past six months.
Daily Use	Once a day or more often. For alcohol and drugs, calculated for the past six months. For smokeless tobacco and cigarettes, for the past 30 days.



# Executive Summary

**T**he *Seventh Biennial Statewide Survey of Drug and Alcohol Use Among California Students in Grades 7, 9, and 11* or the California Student Survey of Substance Use (CSS) continues the important work of the State to monitor, understand, and prevent adolescent use of alcohol, tobacco, and other drugs (ATOD). Since 1991, California law has required the survey, but participation by school districts, schools, and students is voluntary. WestEd administered the survey under conditions of strict confidentiality and anonymity that ensured all student and parent rights as approved by the California Health and Human Services Agency's Committee for the Protection of Human Subjects. Written parental approval was obtained for every student who took the survey. The final student sample consisted of 11,696 respondents in grades 7, 9, and 11 in a representative, randomly selected sample of 166 public and private schools.

Compared to the *Sixth Biennial CSS* in 1995-96, the current findings indicate little change in ATOD use in any grade. The changes that did occur were mostly declines, especially for alcohol and cigarette use among 7th graders. The results suggest that the general rise in ATOD use, particularly marijuana use, that characterized the first half of the 1990s has leveled off and may even be reversing among younger students. While this is encouraging, adolescent ATOD use remains as common today as in 1985 when this survey was initiated. In the following summary, if no change is noted, the results were not significantly different from 1995.

## *Background*

---

Between 1985 and 1989, drug use and cigarette smoking among California students steadily declined. In 1989, alcohol consumption declined as well. In the 1991 survey, signals were mixed. Students reported: (a) a resurgence in alcohol and tobacco use; (b) slight increases in the use of marijuana, LSD, and inhalants; but (c) continued declines in the use of cocaine and amphetamines.

The 1993 CSS survey was a wake-up call to the State. Major increases occurred in the use of marijuana, LSD, inhalants, and several other drugs, especially among 9th graders. Cigarette smoking continued to rise, and alcohol consumption remained at elevated levels. Overall, ATOD use approached or equaled the peaks reported in 1985.

In 1995, changes in behavior were relatively few and small in size. The most notable exceptions were a continued rise in marijuana use, polydrug use, and attending school "high." Interpretation of the 1995 results was complicated by a drop in student participation rates, with wide variations between schools, due to a new requirement for written parent consent. Comparisons with earlier findings had to be made with caution, but the changes that occurred continued preexisting trends.

### *Survey Plan and Sample*

---

The *Seventh Biennial CSS* methodology replicated in most essential elements that of 1995. However, with the assistance of supplemental federal funding, the number of schools and classrooms in the sample was increased to (a) expand the number of questions asked by using two survey forms; (b) compensate for the reduced participation rate that resulted from written consent in 1995; and (c) narrow statistical confidence intervals. A set of core items was included in each of the two survey forms, which were completed by half of the students in each classroom.

WestEd randomly selected schools for the sample proportionally to the number of schools in each of six geographic regions of the State, randomly maintaining approximately half of the schools in each region from the 1995 survey. Then three regular classrooms were selected for each grade level at each school. The *Seventh Biennial CSS* was administered in 166 public and private (independent) secondary schools statewide between November 1997 and April 1998. Almost 11,700 students in grades 7, 9, and 11 completed the survey, the largest sample in its history. Still, as in 1995, the overall response rate was only 59%, largely due to the effect of written consent requirements. The ethnic breakdown of the final sample was similar to previous survey administrations. Females were overrepresented, as has been found in other active-consent samples. The data were weighted to correct this gender bias. Parent consent form return rates varied greatly from school to school and classroom to classroom.

## *Use Prevalence and Frequency*

---

### **Alcohol Use**

Alcohol remains the most widely used class of substances, with overall prevalence rates similar or slightly lower than in 1995. In the upper grades, rates for most beverage categories remained approximately what they were in the past. In grade 7, several rates fell.

- **Six-Month Prevalence.** Nearly half of 7th graders (47%), two-thirds of 9th (67%), and three-quarters (75%) of 11th reported at least some drinking in the previous six months. These levels were about the same as those observed throughout the 12 years of the survey, allowing for moderate fluctuations. For 7th grade, however, use fell below 50% for the first time. Since 1985, weekly drinking during this period was stable, at 9% of 9th graders and 20% of 11th.
- **Current Drinking (past 30 days).** Twenty-two percent of 7th, 37.5% of 9th, and 47% of 11th graders consumed alcohol at least once in the previous 30 days. Compared to 1995, rates were equivalent in grade 11. In grades 7 and 9, they were down slightly.
- **Lifetime Drinking.** There was a drop in lifetime drinking among 7th graders, from 58% in 1995 to 52%. It remained approximately the same for 9th and 11th graders at 73% and 81%, respectively.
- **Excessive Alcohol Use.** About one-fifth of 9th graders (19%) and one-third of 11th graders (31%) were classified as excessive alcohol users. There was no change since 1995 among 11th graders, but a moderate decline among 9th graders (from 23% in 1995).
- **Binge Drinking.** The percentage of students who had five drinks in a row in the past two weeks is a standard indicator of episodic heavy drinking, often called binge drinking. The rates were 10% for 7th grade, 20% for 9th, and 25% for 11th (compared to 8%, 17%, and 22% in 1995). Binge drinking increased slightly in all grades, one of the few alcohol indicators to rise.
- **Early Intoxication.** Lifetime alcohol intoxication (ever used) was reported by 20% of 7th graders by age 12, vs. 21.5% in 1995.
- **Drinking and Driving.** Among 11th graders, 37.5% reported driving a car after drinking or being in a car driven by a friend after drinking, the same as in 1995.

### **Drug Use**

More than one-quarter (27%) of 7th graders, 43% of 9th, and almost half (49%) of 11th reported using a drug other than alcohol or tobacco on at least one occasion in the past six months. Although not significantly different than in 1995, these rates remain at

survey highs for all grades. The escalation in marijuana use since the early 1990s is the main factor accounting for this.

### **High-Risk Drug Use**

The percentages of high-risk drug users (past six months) in grades 9 and 11 remained steady at 20% and 27%.

### **Marijuana**

Marijuana use has leveled off after the sharp upward trend in the first half of the decade. Nevertheless, six-month prevalence rates are almost at the peak levels which occurred in 1985 and 1995 for grades 9 and 11.

- **Six-Month Prevalence.** Eleven percent of 7th graders, 32.5% of 9th, and 42% of 11th reported using marijuana in the past six months, essentially the same as in 1995. In comparison, the survey lows reported in 1989 were 7%, 20%, and 28%, respectively.
- **Weekly Use.** Nine percent of 9th graders and 14% of 11th graders used marijuana once a week or more frequently (during the past six months). These are modest declines for both grades compared to 1995, when rates were 12% and 16.5%, respectively.
- **Current and Lifetime Use.** The 30-day (current) prevalence rate remained about the same in 7th (7.5%) and 11th grades (26%). In 9th grade, it declined to 18% (vs. 24% in 1995). Lifetime marijuana use declined marginally in grade 9 to 33% (vs. 35%). It was unchanged in grades 7 (11%) and 11 (46%).

### **Other Drugs**

As in 1995, there were few changes in the six-month use of specific drugs other than marijuana, in contrast to the major increases observed in 1993. Changes that did occur were small and inconsistent across grades, suggesting general stability.

- **Inhalants.** Inhalants were the most popular drug among 7th graders and the second most popular among upper graders. Six-month inhalant use rose slightly (2 points) in grade 7, to a survey high of 18%. Use was stable in grades 9 (21%) and 11 (15%), but still at a four-year survey high following the increases between 1989 and 1993. This rise in inhalant use is one of the significant trends of the 1990s.
- **LSD.** Six-month use of LSD declined in 9th grade from 10% in 1995 to 6% and remained about the same in 11th grade (at 10%). The increase in LSD use observed between 1989 and 1993 may have run its course and perhaps reversed.



- **Cocaine.** Cocaine use held steady at 6% among 9th graders and 8% among 11th graders.
- **Methamphetamine.** Use of methamphetamine and other amphetamines ("speed") rose between 1991 and 1993 to exceed cocaine. Since then, trends have been mixed. In 1997, use may have marginally increased among 11th graders (from 10% to 12%), but it declined among 9th graders (from 11% to 8%). Present rates in both grades are still lower than in 1985, which saw peak levels.

### **Tobacco Use**

Cigarette smoking trends have been similar to marijuana, declining in the late 1980s and rising in the early 1990s. In this context, present findings are mildly encouraging.

- **Cigarette Smoking.** Among 7th graders, current cigarette smoking declined to a new low for the survey at 13%, compared to peaks of 18% in 1991 and 1993. Among both 9th and 11th graders, it was 29%, about the same as in 1993 and 1995.
- **Daily Smoking.** Current smoking of one or more cigarettes each day was unchanged across grades, at 2% in 7th grade, 7% in 9th, and 11% in 11th. These rates have been relatively constant since 1987, except for a dip in 1991 among upper grades.

## *Patterns of Use*

---

### **Abstinence**

Forty-four percent of 7th graders, 21.5% of 9th, and 17% of 11th graders have been totally abstinent (never used alcohol or drugs) during their lifetimes. Six-month abstinence rates in 9th and 11th grades were about the same as in previous surveys at 29% and 23%, respectively. However, the positive news is abstinence rose marginally to 47% (from 45% in 1995) among 7th graders, equaling the previous peak in 1989.

### **Polydrug Use**

The percentage of upper graders reporting that they used more than one drug on the same occasion (polydrug use, alcohol included) held steady at 23% among 9th graders and 34% among 11th graders. Present rates are still significantly higher than in 1991, which reported survey lows (14% and 21%, respectively). Trends in polydrug use parallel those for marijuana use.

### Use in School

One-fifth of 9th graders, and almost one-third of 11th graders (31%), reported attending school at least once while “high” on alcohol or another drug. This behavior has been mainly stable since 1993, but it declined among 9th graders in 1997 (from 23% in 1995).

### Cessation Efforts and Perceived Treatment Need

Students are more likely to try quitting tobacco and drug use than alcohol. Among lifetime users only about one-fifth of 9th and 11th graders had made any attempt to stop using alcohol compared to 28% and 38% for drugs, and 43% and 46%, respectively, for cigarettes. However, only 8% of high school students—or 17% of users—appear to even entertain the idea they might need help for their alcohol or drug use.

### Use-Related Problems

Students were given a list of 10 specific problems that could result from alcohol and drug use. One or more problems were experienced from alcohol by 21% of 9th graders and 28% of 11th graders; and by 16% and 20%, respectively, from drugs. Among weekly users of alcohol or marijuana in 11th grade, the total problem rates rose to 64% and 58%, respectively. For both alcohol and drugs, students reported most frequently experiencing adverse *pharmacological affects, hurting school work, interpersonal conflicts, and money problems*.

## Perceived Harm of Frequent Use

---

Student ratings for frequent (daily or almost daily) use of marijuana as *extremely harmful* have been consistently higher than for alcohol, with cigarettes falling in between. However, the perceived harmfulness of frequent marijuana use seems to be softening.

- **Alcohol.** In 7th and 9th grades, student ratings of extreme harm rose from 35% to 46% in 7th grade, and from 28% to 35% in 9th grade. The rate was unchanged in 11th grade at 36%.
- **Marijuana.** In contrast, 73% of 7th graders, 49% of 9th, and 42% of 11th graders rated frequent marijuana use as extremely harmful. Whereas the perceived harm rate is double that for alcohol in 7th grade, it is only slightly higher in 11th grade. Moreover, there has been a downward trend in these perceptions since 1991 for both grades 9 and 11.

- **Cigarettes.** For frequent smoking, the *extremely harmful* rate rose substantially compared to 1995 in grade 7 (50% vs. 43%) and in grade 9 (40.5% vs. 32%). It was stable in grade 11 at 42.5%. Despite this apparent improvement, the rates are still lower in all three grades than in 1993.

## *Social Influences*

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### **Availability**

Older teenagers perceived marijuana to be as easy to obtain as alcohol.

- **Alcohol.** This survey showed a big increase in students reporting that alcohol is easy for them to get. About one-third of 7th graders (37%), two-thirds of 9th graders (66%), and three-fourths of 11th graders (79%) considered alcohol to be either *very easy* or *fairly easy* to obtain. These rates were substantially lower than in 1995, when they stood at 45%, 75%, and 83%, respectively.
- **Marijuana.** The *very/fairly easy* rate was lower for marijuana than for alcohol among 7th graders (28%). There was little difference from alcohol among 9th graders (64%) or 11th graders (77%), as has been the case for the past three surveys.

### **Marijuana Use Among Peers**

Research on adolescents has shown that spontaneous modeling of peers is a powerful influence on youth substance use. The proportion of students who believed that at least half of all students had tried marijuana (i.e., it is normative behavior) rose from about one-fifth in 7th grade to more than two-thirds in 11th. The results support the theory that youth overestimate use prevalence.

### **Adult Use**

Use by adults, especially adults whom a young person admires and respects, may provide a model for a youth's own behavior.

- **Marijuana.** Half of 9th graders and more than half of 11th graders (59%) knew one or more adults who used marijuana regularly. These were substantial increases compared to the rates reported in 1995 (43% and 53%).
- **Stimulants.** About 1 in 5 of 9th-grade students knew one or more adults who used cocaine (19%) or amphetamines (21%). The rates for 11th graders were only slightly higher (22% and 25%, respectively).

## *National Comparisons*

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Based on national data from the annual Monitoring the Future (MTF) Survey, prevalence rates for alcohol, marijuana, and cigarette use generally appear to have remained more stable in California since 1991 than nationally. Current results suggest use of marijuana and cigarettes in California are both declining compared to national trends. Alcohol use trends appear very similar in the two surveys.

## *Conclusion*

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The general stability in ATOD use in grades 9 and 11 is a positive sign after increases reported between 1991 and 1995. Even more encouraging are the declines since 1993 among 7th graders in six-month alcohol drinking (from 53% to 47%) and current smoking (18% to 13%). Both are at 12-year survey lows. The lifetime drinking rate also dropped substantially in grade 7 (from 58% to 52%).

Nevertheless, many indicators across grades, notably those for marijuana and inhalants, remain at survey highs comparable to the peaks of 1985. Progress in reducing drug use among 7th graders is not as evident as for alcohol and cigarettes. Although marijuana use was flat, it remains at a survey high. Also of concern is the softening of perceived harm from frequent marijuana use in all grades, which may portend further increases.

The challenge for the next two years is to *reduce* consumption across all drugs in all grades. The findings suggest that among the strategies that should be implemented are countering overestimation of use among peers, increasing awareness of the harm associated with drug use, and providing more assistance to help older youth reduce or stop use. ☞

# Introduction *and* Methods

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**Despite notable shifts during the survey history, adolescent use of alcohol, tobacco, and other drugs in California remains as common in the mid-1980s when substance use was at its highest level.**

**T**his report summarizes results of the *Seventh Biennial California Student Survey of Substance Use (CSS)* among 11,696 students in the 7th, 9th, and 11th grades in 166 public and private schools. It has now been 12 years since the survey was initiated in 1985. California law requires the Office of the Attorney General to conduct the survey every two years to monitor trends in alcohol, tobacco, and other drug (ATOD) use as well as attitudes and use correlates. Participation by school districts, schools, and students is voluntary,<sup>1</sup> and the survey is administered under conditions of strict confidentiality and anonymity, with written parental consent required for all respondents. The California Health and Human Services Agency's Committee for the Protection of Human Subjects reviewed and approved the research protocol, including all procedures, the sampling plan, the survey instrument, and consent forms.

Between 1985 and 1989, use of drugs and cigarettes by California students steadily declined. In 1989, alcohol consumption declined as well. In the 1991 survey, it was difficult to reach firm conclusions. Students reported (a) a resurgence in alcohol and tobacco use; (b) slight increases in the use of marijuana, LSD, and inhalants; and (c) continued declines in the use of cocaine and methamphetamines. Results of the 1993 survey were a wake-up call to the State. There were large increases in the use of marijuana in grades 9 and 11, as well as increases in the use of inhalants, methamphet-

amines, LSD, and polydrug use. While alcohol use didn't rise, it remained at high levels. No reduction occurred in cigarette smoking.

The 1995 results differed little from 1993. Changes were relatively few in number, small in size, and often inconsistent across grades (e.g., slightly higher in one grade and lower in another). The main exceptions were a continued rise in marijuana use, polydrug use, attending school "high," and drug intoxication. Interpretation of the 1995 findings was complicated by a new requirement to confirm parent or guardian approval in writing. Because the effects of this change on the results could not be determined, comparisons with earlier findings were made with caution. The 1995 sample was considered a new benchmark from which to monitor future use.<sup>2</sup> However, the changes that did occur were consistent with previous trends.

For 1997, there were no radical differences in the results compared to 1995, or even 1993. The differences that did occur were generally small and often inconsistent across grades. The conclusions reached in 1995 still apply. Despite notable shifts during the survey history, adolescent use of alcohol, tobacco, and other drugs in California remains as common (among the actively-consented sample in the current survey) as in the mid-1980s when this survey was initiated and when substance use was at its highest level.

### *Survey Administration and Content*

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WestEd proctors administered the surveys at each school site in the late fall and winter of the 1997-98 school year. Scripted instructions were read to ensure that all students understood the purpose of the survey and their rights as voluntary survey participants.<sup>3</sup> This included assurances of personal anonymity and data confidentiality. No personal names were recorded on the answer sheets (only school, grade, age, gender, and ethnicity). Respondents were seated so that other students and proctors could not see their responses. Students placed their completed answer sheets in an envelope that was sealed and sent to WestEd.

#### **School Grades Assessed**

Each of the age cohorts that the survey assesses is of special interest. Grade 7 (modal age 12) is the last preteen year. Levels of AOD use have consistently been low at this grade level, but this is also an age when initially rates began to rise, rendering it a natural baseline for comparisons with teenage populations. Grade 9 (modal age 14) is typically the first year of senior high school, a time when the prevalence of AOD use

goes up to substantial levels. By grade 11, most students who will initiate substance use in secondary school have done so.<sup>4</sup> Collecting information in this penultimate year of high school also provides a more accurate profile of the total school population than the senior year because fewer students have dropped out. Research shows that school dropouts report higher drug involvement than their in-school peers.<sup>5</sup>

### **Instrument Content**

The CSS uses the same multiple-choice questionnaire for grades 9 and 11. Seventh graders are given a shorter version, which is less demanding of their reading skills. A copy of the upper-grade instrument is appended to this report (Appendix B). The surveys have also been placed, as well as this report, on the WestEd web page, from which they can be downloaded ([www.wested.org/css](http://www.wested.org/css)).

Since 1985, the survey has used a core set of questions to assess substance use behaviors, attitudes, and correlates.<sup>6</sup> In later surveys, additional questions were incorporated on tobacco use, use-related problems, and drug prevention, as well as violence and other related risk behaviors.

For the 1997 survey, federal funding was obtained to further expand the content with additional items on marijuana use, awareness of Proposition 215 (the so-called "Medical Marijuana Initiative"), and risk and protective factors associated with substance use. The results from these items will be summarized in a future supplementary report. To accommodate these additional items, two versions or forms of the survey were developed, with a common core of items on both versions. In each classroom, the forms were alternated between students so that approximately half of them filled out each form.

Substance use is assessed during three main time periods: a student's lifetime and the six months and 30 days prior to the survey. Each of these three time periods provides different information useful for understanding patterns of AOD use, for guiding prevention program decision-making, and for making comparisons with other survey results.

- **Lifetime.** The percentages of students who have ever tried alcohol or other drugs are inevitably of interest because prevention policy is focused on stopping initiation of any use and these rates are a gauge of the overall drug environment in a school and community. However, these rates must be treated with some caution. By themselves they mask widely divergent ranges in substance use experience, from a single experimentation to regular, heavy use. They may be inflated by very early experiences involving only minuscule amounts on only one occasion.

- **Past 30 days.** Thirty-day rates are a standard indicator of current use. Comparing lifetime and current use helps differentiate between youth who may just experiment once or twice in their lifetime and more regular users. The differences between the two are a gauge of discontinuity (the proportion of youth who experiment with a substance but do not advance to regular use). However, 30-day rates may exaggerate recent, unique short-term behavior, and they are vulnerable to seasonal variations.
- **Past six months.** The six-month frequency item has been the primary focus of the survey and report since 1985. It can be thought of as assessing recent use, as compared to 30-day "current" use. This timeframe provides a corrective to short-term variations in drug use that might occur during the month prior to the survey. Analysis indicates that these rates are comparable to 12-month prevalence rates reported in other surveys. This item also provides the best data on how regularly drugs are used over time. Students are asked to indicate the frequency of AOD use during this period, from which the proportion they used every month, week, and day is calculated. The six-month monthly use rate can be compared with current use (past month) rate to provide an indication of how many respondents who reported using a substance in the past month did so regularly.

In addition to the six-month use frequency, the survey contains several other items designed to assess the frequency and level of involvement. It is important to assess both. Frequent drug use of even small amounts places a student at risk of escalating to heavy use patterns. However, as an indicator of AOD involvement, frequency rates alone can be misleading. They may overstate the proportion of youth who use drugs often but in small amounts, compared to those who may use them less frequently but in large amounts. Even infrequent heavy use is troubling because it can result in acute adverse pharmacological effects, including physiological, emotional, and judgmental impairment that affect driving, and may cause violence and risky sexual behavior.

### **Sample Selection and Recruitment**

The sampling strategy involved two stages: (a) random selection of high schools and their feeder schools enrolling 7th graders and (b) random selection of three classrooms for each grade surveyed in each school. Half of the schools from the previous sample (selected at random) were retained to promote data comparability.

### **School Selection**

To compensate for the use of two survey forms, the number of schools in past samples was increased by half. Ninety-four senior high schools were selected randomly



from a six-cell sampling matrix representing six regions of the State (San Francisco Bay Area, Los Angeles County, and San Diego County, plus the remainder of the State divided into southern, central, and northern counties). The number of high schools sampled within each cell was proportional to the number of senior high schools in that cell. For each high school, one "feeder" junior high or middle school was then selected that enrolled 7th-grade students who demographically resembled as closely as possible the high school students. This produced a total target sample of 188 schools, of which 88 enrolled 7th graders.<sup>7</sup> The school sample in each region resulted in an appropriate representation of regular and continuation high schools.

In addition, private high schools with an enrollment of more than 100 and associated feeder schools were selected for each of the six regions. This contributed another 36 schools to the intended total sample, of which 13 were feeder institutions. The final target sample was 123 high schools and 101 feeders. (Because many private schools included grades 7-12, there are fewer separate feeder schools.)

The Office of the Attorney General sent invitations to participate to the superintendents of each school district containing one or more targeted schools. Once district approval was obtained, the school principals were contacted. If a district or school was unable or declined to participate, the next replacement school from the randomly generated list was selected until the targeted number of senior high schools was achieved.

### ***Classroom Selection***

In the second stage, three classrooms per grade were randomly selected at each school from among the set of classes required for all students in each grade.<sup>8</sup> The student sample was embedded within the classrooms to more easily monitor parent consent and assess those students with approval. Previously, two classrooms per grade were surveyed. The third classroom was added to compensate for the reduced response rates that occurred in 1995 due to the change to written consent procedures. This had two other benefits. First, it helped compensate for intercluster correlation; that is, the possibility that within the same classroom students may be more homogeneous than a sample of students chosen at random from the total student body. Second, it compensated for the use of two forms on which some items were answered by only half of the respondents at each school.

### **The School Sample**

Table 1 provides a breakdown of the number of public and private schools targeted and actually assessed by region. A total of 166 schools (88 high schools and 78 feeders)

participated. Eighteen districts declined. Overall, 74% of schools contacted completed the survey, with the participation rate slightly higher among feeder schools than high schools. (The actual agreement rate was higher but adverse weather conditions and other unexpected developments forced some schools to cancel the survey at the last minute when it was too late to find replacements.)

TABLE 1

**School Sample: Targeted vs. Participating Schools**

Region	Feeder Schools (Grade 7)			High Schools			Total
	Targeted n	Surveyed n	Percent	Targeted n	Surveyed n	Percent	Percent Surveyed
Bay Area	16	10	63%	19	14	74%	69%
Los Angeles	18	14	78%	22	15	69%	73%
San Diego	8	6	75%	9	5	56%	65%
Northern	17	13	76%	21	15	71%	74%
Inland/Southern	20	15	75%	25	17	68%	71%
Central	22	20	91%	27	22	82%	86%
<b>Total</b>	<b>101</b>	<b>78</b>	<b>77%</b>	<b>123</b>	<b>88</b>	<b>72%</b>	<b>74%</b>

Participation by private schools was less satisfactory than for public schools. Only 31% of targeted private middle schools and 22% of high schools participated. Authorities and/or boards of private schools were much less willing to participate than were public school officials and boards, despite assurances that results for individual schools were absolutely confidential. Excluding them, the participation rate for only public schools was 84% overall (83% for senior high and 84% for feeder).

Of those districts or schools that declined to participate, the three most frequently given reasons were (a) opposition to drug surveys by the parents or the school board, (b) conflict with school activities and/or loss of instructional time, and (c) previous commitment to conducting another drug survey. In regard to the first two concerns, it is important to keep in mind that the number of classrooms impacted by the survey was small and that the survey was intended to help the State reduce problem behaviors and negative school environments that are major impediments to promoting school success. School reform efforts are fundamentally linked to creating safe and drug free schools.

### **Student Consent Procedures**

Although parental consent has always been required for student participation, the CSS used implied or passive consent procedures prior to 1995. Parents were informed about the survey and that they had the right to deny their child's participation. It was

assumed that the students could participate as long as their parents did not explicitly forbid it. Starting in 1995, the State required active or written parental consent. No student under age 18 could be surveyed unless the school had a signed approval form from a parent or guardian. The sponsoring agencies enacted this change in response to growing parental and legislative concerns about the protection of parent and pupil rights, including federal legislation that would make it a requirement if funds provided by the U.S. Department of Education were being used.

The California Health and Human Services Agency's Committee for the Protection of Human Subjects reviewed and approved the consent forms, as well as all other procedures and materials related to respondent rights and risks of participation. The consent materials included information on the purpose and sponsorship of the survey, its content and method, participant rights, confidentiality and anonymity procedures, possible risks and benefits, and whom to contact with questions. A Bill of Rights for research participants was also provided.<sup>9</sup>

While WestEd selected the classroom and administered the survey, significant responsibility remained with the school. Teachers sent the consent form home with each student, accompanied by an explanatory letter from the principal. Local survey coordinators and teachers tracked and identified those students whose parents granted participation permission. The teachers made arrangements for the survey administration and encouraged student attendance. Schools received a stipend of \$30 per class to compensate for the extra work and expense involved. This stipend was awarded whether or not the parents granted permission. Research and experience indicate that written consent procedures result in lower response rates largely because parents fail to return the forms, not because they disapprove of participation. It is critically important that schools encourage parents to return the forms and carefully monitor the process.

### *Sample Characteristics*

As shown in Table 2, the final sample consisted of 11,696 students for the three grade levels. This is slightly less (6.4%) than the total number of students actually surveyed due to the elimination of unusable answer sheets.

This represented almost a doubling of the sample size in each grade compared to 1995, with the smallest sample in grade 9 (N = 3,437) and the largest in grade 7 (N = 4,285). Some of this difference by grade can be attributed to a tendency for higher

consent return rates among 7th graders, although a higher proportion of parents of 7th graders also denied permission than those of high school students. As in 1995, the overall response rate (the proportion of the targeted sample that took the survey) was only 57% because of the difficulty in obtaining written parental consent procedures. This difficulty lies not in parents or guardian disapproval of participation (under 10% do so), but in getting the forms returned.

**TABLE 2**  
**Number of Respondents, by Gender and Grade**

	Grade 7				Grade 9				Grade 11			
	1995-96		1997-98		1995-96		1997-98		1995-96		1997-98	
	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)
Male	901	46%	1,806	44%	770	45%	1,527	47%	862	46%	1,817	47%
Female	1,065	54%	2,277	56%	942	55%	1,719	53%	1,018	54%	2,057	53%
<b>Total<sup>a</sup></b>	<b>2,050</b>		<b>4,285</b>		<b>1,796</b>		<b>3,437</b>		<b>1,929</b>		<b>3,974</b>	

<sup>a</sup>Total includes respondents who did not indicate gender.

Disproportionate numbers of female respondents were found at each grade level, as found in 1995. Through the 1993 survey, the samples consistently reflected the even gender-split in the school enrollment. In 1995 and 1997, females outnumbered males at each of the three grade levels by 8 to 10 percentage points. This is probably an effect of written consent procedures. Females may be more accommodating in giving the consent forms to their parents and returning them to the school. This bias was corrected for by weighting the data to reflect the school grade percentages of males and females, as indicated by the California Basic Education Data System (CBEDS).

Table 3 compares the racial/ethnic composition of the current, 1995, and 1993 samples. Because of California's dynamic demographic mix and ever-increasing numbers of youth with racially and ethnically mixed parentage, the survey gives students "mixed" and "other" alternatives to the traditional five major ethnic groups (American Indian or Native American, African-American or Black, Asian, Caucasian or White, or Hispanic or Latino). Mixed ethnicity was defined for students as two or more of the five major ethnic groups.

The table also includes CBEDS data on State enrollment, but direct comparisons are misleading because CBEDS categories do not include "mixed" or "other" categories. Relatively high percentages of CSS respondents marked these alternatives, specifically 20% in grade 7; 18% in grade 9; and 16% in grade 11.

# INTRODUCTION AND METHODS

TABLE 3

**Racial/Ethnic Sample Composition, 1993-94 Through 1997-98**

	Asian (%)	African American (%)	Hispanic (%)	Native American (%)	White (%)	Mixed (%)	Other (%)
<b>Grade 7</b>							
1993-94	12.0	5.5	30.2	5.7	33.4	7.7	5.3
1995-96	9.2	4.6	24.8	3.0	37.6	15.4	5.5
1997-98	10.9	3.6	24.8	4.4	36.0	14.4	6.0
CBEDS 1996/7 <sup>a</sup>	11.7	8.3	38.0	0.9	41.0	-	-
<b>Grade 9</b>							
1993-94	9.7	5.9	28.1	3.5	40.8	8.5	3.5
1995-96	10.7	4.1	22.8	2.2	41.5	13.4	5.4
1997-98	10.4	3.5	23.6	1.7	43.0	13.3	4.4
CBEDS 1996/7 <sup>a</sup>	11.8	8.6	39.3	1.0	39.3	-	-
<b>Grade 11</b>							
1993-94	12.2	5.1	24.9	2.6	43.7	7.9	3.5
1995-96	10.4	6.9	22.1	1.5	42.3	13.3	3.5
1997-98	11.2	5.0	22.4	1.3	43.7	12.1	4.3
CBEDS 1996/7 <sup>a</sup>	13.4	8.2	34.7	1.0	42.8	-	-

<sup>a</sup>California Basic Educational Data System (CBEDS), California Department of Education.

Overall, sample ethnicity was consistent across all three surveys, except that the percentage of African-Americans had declined since 1993 in grades 7 and 9, and since 1995 in grade 11. Although the proportion of Hispanics was the same as in 1995, there was a sharp drop between 1993 and 1995. Both declines may be related to the rise in the proportion of youth identifying themselves as of mixed ethnicity. An examination of additional data on the mixed respondents revealed that the majority indicated some Hispanic heritage.

Two other factors may have influenced the slight discrepancies between the current and previous racial/ethnic distributions. Despite the fact that the proctors "walked" the respondents through the demographic section of the questionnaire, relatively large numbers (from 8% to 12%, depending on grade level) failed to respond or made either multiple or out-of-range responses as occurred in 1995. For the overwhelming majority of the respondents whose ethnicity could not be established, the item was left blank. There is no way to determine whether this tendency was random over the various racial/ethnic groups, or whether one or more groups were more likely than others to ignore the ethnicity question. However, the reluctance to identify ethnicity may have been strongest among Hispanics and African-Americans, as the mid-1990s were a period of heightened racial tensions in California.

Second, it is also possible that these declines reflect a socioeconomic or ethnic bias introduced by the active consent requirement, although this could not be determined for sure. Previous research has suggested that written consent, by reducing the number of students who participate in a survey, particularly minorities, might bias a sample in ways systematically related to alcohol and drug use.<sup>10</sup> As noted, this appears to have resulted in an underrepresentation of males, which was corrected by weighting. Was any other systematic bias introduced into the sample characteristics that would affect comparability to prior findings? Analysis of response rate data by schools in 1995 yielded little evidence for an underrepresentation of minorities. The only significant correlation in 1995 between the ethnicity of a school's enrollment and its survey response rate was for higher responses in schools with higher Asian enrollments. There was also some suggestion of lower rates among schools with high African-American enrollment.

The most significant correlation was for higher response rates at schools enrolling more seniors who graduated and who took college preparatory courses.<sup>11</sup> Response rates were lower for schools with more students on school meal programs (7th grade) and more students from families on public assistance (Aid to Families with Dependent Children or AFDC). Thus, it appeared that the 1995 student sample was biased toward the inclusion of relatively more students from economically advantaged and, conversely, relatively fewer participants from economically disadvantaged families.<sup>12</sup>

Replication of these analyses for 1997 yielded similar results. While this confirmed the comparability of 1995 and 1997 data, the possible effects of these differences on their comparability with previous student surveys are less clear. The implications of response-rate differences for interpreting survey results are difficult to unravel. Differences (or similarities) may be due to (a) changes in the sample associated with active consent and the inclusion of private schools, (b) actual trends in the total population of California's secondary school students, or (c) both. When comparing current and earlier response percentages, it is impossible to untangle sampling effects from substantive effects. Therefore, the 1995 CSS results had to be considered as a new baseline for an era in which active parental consent for the assessment of youth risk behaviors is likely to be State policy.

This report is thus focused on comparing 1997 to 1995 results. Because long-term trends are inevitably of interest, they are reported, but there is the need for caution in comparing the last two surveys with the previous five. Nevertheless, as will be shown,

the trends observed during the past two years are consistent with those seen previously in California and those occurring nationally during the same period.

One other factor sets apart the 1995 and 1997 CSS from their predecessors: the inclusion of private school students so that the results would more accurately reflect all the students in the State. However, it is not believed this has had a significant effect on survey comparability. Although separate private school samples in the past had reported some variations in some drug categories compared to public school students, overall the results suggested similar levels of involvement.<sup>13</sup> Moreover, as noted, the proportion of private school students has been small.

### *Data Analysis*

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Through 1993, results were calculated using students as the unit of analysis. In 1995 it was determined that the wide variation in school response rates associated with active consent warrants a more conservative approach. Since then, schools have been the unit of analysis because the much smaller number of cases yields more conservative confidence intervals.<sup>14</sup> The prevalence rates generated by both methods, however, have been very similar. At the same time, in 1997 the number of schools in the sample increased to yield more cases.

One limitation of this approach is that the number of students assessed at a particular school is unlikely to be exactly proportional to overall enrollment, and in some cases may differ considerably. This is especially true because up to three classrooms per grade were assessed regardless of total enrollment. A school enrolling 150 students at the 11th grade would contribute the same number of cases as a school enrolling 1,000 students. This discrepancy was compensated for by means of statistical weighting, adjusting the data first for school enrollment and second for enrollment within a region. This assured that neither schools nor regions would exert an influence in the final results that was disproportionate to the number of students they enrolled. As mentioned, the data to correct the overrepresentation of females was also weighted.



## INTRODUCTION AND METHODS

### ENDNOTES

- 1 Section 11605 of the Health and Safety Code enacted in 1991 requires the Office of the Attorney General, in consultation with the Governor's Policy Council on Alcohol and Drug Abuse, to conduct the survey. In 1993 the Office of the Attorney General was joined in sponsorship of the survey by the California Department of Education, Department of Alcohol and Drug Programs, and Department of Health Services.
- 2 Earlier results were reported in Skager, Fisher, & Maddahian, 1986; Skager, Frith, & Maddahian, 1989; Skager, Austin & Frith, 1990; Skager & Austin, 1993; Austin & Skager, 1996; and Skager & Austin, 1998.
- 3 Prior to 1993, school staff administered the survey using detailed instructions from the contractor and results were encoded manually.
- 4 See the discussion in Skager & Austin, 1993.
- 5 Austin & Horowitz, 1996.
- 6 The core alcohol and drug items were originally developed in the early 1980s by the Center for the Study of Drug Abuse Etiologies at the University of California, Los Angeles.
- 7 The total number of feeder schools for 7th graders does not equal the number of high schools because feeder schools were not selected for continuation high schools and several high schools in the sample included 7th graders.
- 8 From 1985 to 1993, individual students were randomly selected from the grade level enrollment and "pulled out" of their classes to be surveyed as a group. In 1995, intact classrooms were used in response to several developments. The first was from schools because they viewed it as less burdensome. Second, it was intended to help address a larger problem confronting those who wish to do surveys in schools. Many school personnel have expressed concern over the number of outside surveys conducted in recent years. Intact classroom sampling was undertaken in the hope of minimizing sources of irritation associated with survey administration. Another advantage of this shift was that it facilitated the collection and monitoring of the parent consent forms.
- 9 WestEd provided model letters and forms that were translated into Spanish, Cantonese, Vietnamese, and Hmong.
- 10 Dent et al., 1993; Ellickson et al., 1988; Kearney et al., 1983; Lueptow et al., 1977; Severson & Ary, 1983; Thompson, 1984; Wicker, 1968.
- 11 Skager, R. & Austin, G. (1997), Appendix B.
- 12 Some research suggests that an overrepresentation of high school seniors who intend to go to college may lower the percentages reporting heavy drinking and drug use. (Johnston et al., 1994.)
- 13 See Skager & Austin, 1993, and Austin & Skager, 1996.
- 14 In earlier surveys, each response percentage was based on the number of students who had endorsed each alternative or combination of alternatives. Because of the very large number of cases at each grade level, the confidence intervals for interpreting the significance of differences were relatively small. For the current report, percentages endorsing each alternative were calculated for each school, then weighted and averaged over all participating schools. The overall results were thus based on the number of schools participating in the survey rather than the number of students. As it turned out, the relatively low variance among the school means yielded confidence intervals that were only slightly larger than those that would have resulted from a student-level analysis.



# 2

## Alcohol Use

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**The psychological denial so frequently associated with excessive drinking might suppress awareness that alcohol was directly associated with other problems such as poor grades, getting into trouble, or having conflicts with parents and peers.**

**A**lcohol remains the most widely used substance in all grades, with little change since 1989. Ninth and 11th graders reported similar drinking rates to those of 1995 for both total consumption and across beverage categories. For 7th graders, drinking may have declined slightly. The following are among the major findings:

- Almost half of 7th graders, two-thirds of 9th graders, and three-quarters of 11th-grade students reported at least some recent drinking in the six months preceding the survey. One-fifth of 11th graders also reported weekly drinking.
- Rates for current drinking ranged from 22% of 7th graders to 47% of 11th graders.
- Recent heavy (binge) drinking was reported by 10% of 7th graders, 20% of 9th graders, and 26% of 11th graders.
- Alcohol intoxication at least once was reported by 20% of 7th graders rising to 58.5% in 11th grade.
- More than one-third (37.5%) of 11th graders had been involved in at least one drinking and driving occasion.
- More than one-fifth of 9th graders and 28% of 11th graders had experienced one or more problems associated with use of alcohol.

## Use Prevalence

The overall use rates for alcohol during the last six months, previous 30 days, and lifetime are summarized in Table 4. For six-month prevalence, respondents were asked about their use of the three main types of alcoholic beverages, and then a total alcohol use rate was calculated. For the other measures (lifetime and current), respondents were asked only about the use of any alcohol.

**TABLE 4**  
**Alcohol Use in the Past Six Months, 30 Days, and Lifetime**

	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
<b>Past Six Months</b>						
Alcohol (Any)	50.3	47.2	67.2	67.3	75.3	74.8
Beer	37.1	35.0	54.0	54.4	64.1	63.5
Wine	40.3	36.4	54.8	56.1	60.7	58.6
Spirits	19.9	19.0	41.7	42.2	54.6	54.0
Alcohol Only <sup>a</sup>	29.3	25.7	27.3	27.6	27.8	28.3
<b>Past 30 Days</b>						
Alcohol (Any)	23.2	21.7	39.2	37.5	47.7	46.9
<b>Lifetime (Ever)</b>						
Alcohol (Any)	57.6	52.1	73.5	73.1	82.4	80.6

<sup>a</sup>Did not report any drug use.

### Past Six-Months

About one-half of 7th graders, two-thirds of 9th graders, and three-fourths of 11th-grade students reported consuming alcohol at least once in the past six months. As in previous surveys, beer and wine were the most popular beverages in all grades. Spirits became relatively more popular with age.

- In grade 7, slightly more than one-third of students consumed beer and wine (35% and 36%, respectively). Only 19% reported drinking spirits.
- By grade 11, almost two-thirds of students consumed beer (63.5%), followed closely by wine (59%), and then by spirits (54%).

The proportion of respondents who reported using *alcohol only*—and not any drugs—was just less than 1 in 3 in each grade (ranging from 26% to 28%). The majority of alcohol drinkers in high school—and almost the majority in 7th grade—would appear to be multiple substance users or at least experimenters. The proportion of all

drinkers who did use another drug increased from 46% in 7th grade to 63% in 11th grade. A recent high school drinker is likely to have used a drug as well.

### Twelve-Year Trends

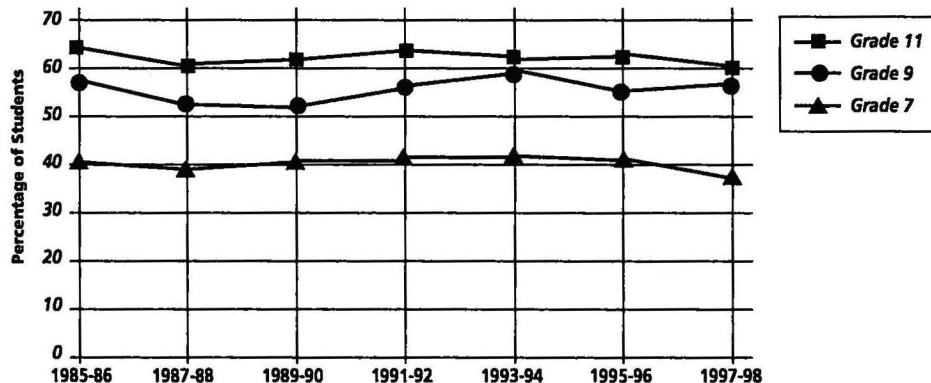
Alcohol consumption is a persistent feature of teenage life. Relative stability over time in six-month prevalence rates has been one of the most consistent findings of the survey, as Figures 1 to 3 illustrate. The major exception to this constancy was a decline in 1989 in consumption of beer and spirits. (See Appendix A for actual rates for each survey year.)

- For high school students, the percentages at each grade level for the total use of alcohol and for each type of beverage were virtually the same in 1997 as in 1995 and very similar to 1985.
- For grade 7, the current survey witnessed a slight drop in beer and wine drinking—and overall alcohol use—compared to 1995. Beer drinking has declined gradually since 1991 when it peaked at 41% (vs. 35% for 1997).

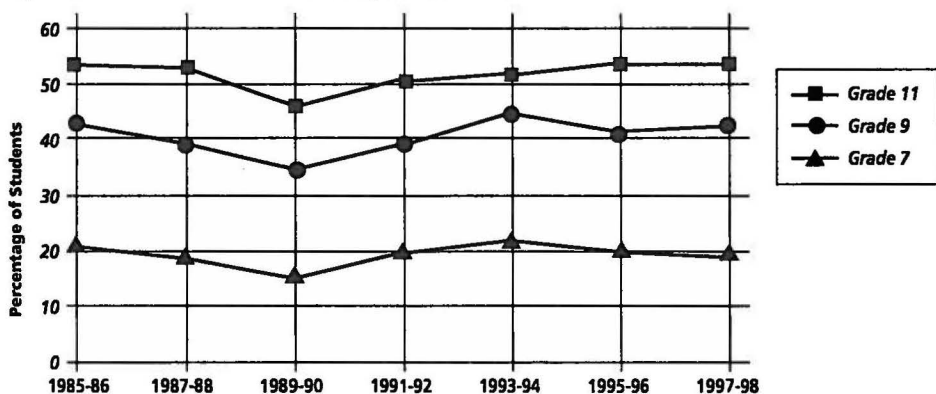
FIGURE 1  
Beer Use in Past Six Months, Since 1985



FIGURE 2  
Wine Use in Past Six Months, Since 1985



**FIGURE 3**  
**Spirit Use in Past Six Months, Since 1985**



### **Lifetime (Ever Use)**

Measures of lifetime alcohol use are arguably less meaningful as indicators of actual use than six-month and 30-day measures (Table 4). Lifetime rates may be inflated by very early experiences involving only minuscule amounts or only one occasion. However, lifetime rates are used because prevention programs have focused on stopping the initiation of any use, especially among younger students (e.g., 7th graders). Youth who initiate alcohol or drug use by the 7th grade are particularly at risk of becoming heavy users and becoming involved in other risk behaviors as well. Finally, lifetime prevalence rates provide a guide for the timing of prevention efforts, which are likely to be most effective if administered just before the ages of peak initiation.

The 1997 results were virtually identical to those in 1995 for grades 9 and 11, but lower by 5 points in grade 7. About half of 7th graders (52%), 73% of 9th graders, and 81% of 11th graders reported having tried alcohol. These rates are only about 5 percentage points higher than the six-month prevalence rates for each grade. This suggests that either (a) most initiation occurred within the past half year, or (b) once an adolescent tries alcohol, he or she will consume it at least once every six months.

The above rates could involve only a sip or two of alcohol. In a separate item, the survey asked respondents at what age they first had an "alcoholic drink." In the instructions, students were informed that a "drink" was "one regular can or bottle of beer or wine cooler, one glass of wine, one mixed drink, or one short glass of liquor." These results suggest that adolescents who try alcohol will consume at least one full drink.

- Lifetime percentages for at least one drink by the modal ages for each grade were almost identical to those for any alcohol use reported in Table 4, at 50% for grade 7, 74% for grade 9, and 82% for grade 11.

These rates have been relatively constant since 1985 and strongly indicate that at least half of students had an alcoholic drink by 7th grade, about 7 out of 10 by 9th grade, and 8 out of 10 by 11th grade.

### **Past 30 Days (Current Use)**

Current use (past 30 days) of alcohol ranged from more than one-fifth of 7th graders to almost one-half of 11th graders (Table 4). These rates are only slightly lower than in 1995. Because of the increase in drinking frequency that occurs with age, the difference between six-month and 30-day rates is narrower in the 11th than 7th grade. The 30-day rate for 7th graders was less than half the six-month rate (22% vs. 47%), compared to about one-third lower for 11th graders (47% vs. 75%). They were 42% and 58% lower, respectively, than the lifetime rates, suggesting that about half of students who try alcohol can be classified as experimenters or occasional drinkers.

## *Drinking Frequency*

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The survey assesses the frequency of use in the past six months, from which monthly and weekly drinking rates were calculated. Frequent drinking, even in small amounts, is a troubling indicator of regular use that could easily escalate.

### **Monthly Use**

For the first time, the proportion of students who reported using each category of alcohol once per month or more often in the past six months was calculated for 1995 and 1997, as shown in Table 5. Across grades, 1995 and 1997 results were very close in each category.

- Monthly drinking (any alcohol) rose fivefold between grade 7 (6%) and grade 11 (31%), whereas the overall prevalence rate rose only by a factor of 1.6. This reflects that alcohol experimentation begins early and that the major change that occurs with age is a rise in the frequency of use.
- About 40% of 11th graders who drank any alcohol in the past six months were monthly drinkers.

Comparing these results with the 30-day drinking rates (Table 4) suggests that for 29% of current drinkers in 7th grade and for two-thirds in 11th grade, drinking is a regular monthly habit.

### Weekly Use

Table 5 also summarizes the percentage of respondents who reported drinking alcohol once a week or more often during the past six months. This measure is important in reflecting very regular drinking rather than occasional or experimental use.

- Weekly alcohol use was very low among 7th graders (ranging from 1% to 4% depending on beverage category). It rose markedly by the 11th grade to 20% for any alcohol and to 17% for beer.
- Among monthly drinkers, almost half in 9th grade and almost two-thirds (65%) in 11th grade reported weekly drinking. *If a high school student drinks at least once a month, the odds are that he or she is drinking every week.*
- Across grades and alcohol categories, 1997 results were virtually identical to 1995, with the exception of a 2-point decline for beer in 9th grade.

Weekly drinking is particularly associated with beer. Among 11th graders:

- The rate for weekly beer drinking (17%) was more than three times that for wine (5%) and twice that for spirits (9%). It exceeded the combined total for wine and spirits.
- One-quarter (26%) of beer drinkers reported weekly use, compared to 15% of spirits drinkers and 10% of wine drinkers.

TABLE 5

#### Alcohol Use at Least Once per Month and Week, Past Six Months

Substance	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Monthly Alcohol (Any)	6.5	6.4	19.2	18.0	30.2	30.8
Beer	4.2	4.5	14.5	12.6	25.6	26.3
Wine	2.9	3.0	8.2	8.0	11.7	12.5
Spirits	2.2	1.7	10.9	9.9	17.2	18.5
Weekly Alcohol (Any)	3.4	3.6	10.8	9.4	19.8	20.0
Beer	2.3	2.5	8.8	6.8	17.2	16.7
Wine	1.1	1.5	3.4	3.4	5.2	5.4
Spirits	1.0	.9	4.8	4.2	9.4	9.4

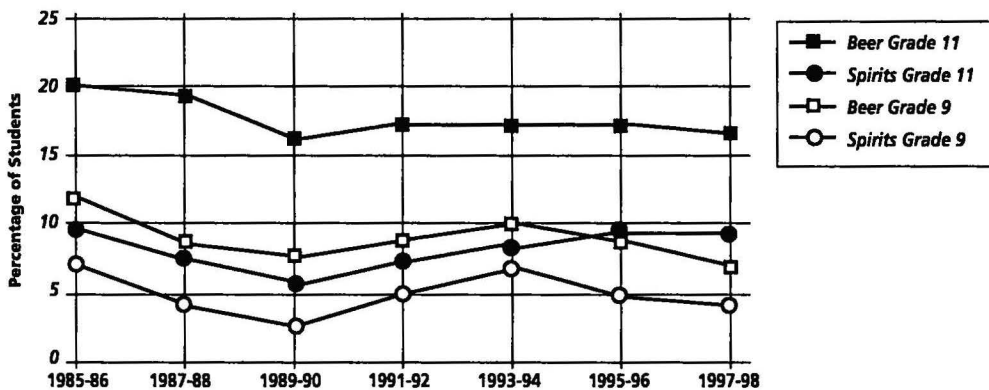
#### Trends in Weekly Use (Past Six Months)

Figure 4 shows trends in weekly beer and spirit drinking among high school students since 1985. Trends follow those for overall prevalence rates. For 11th graders, weekly beer drinking has been almost constant since 1989 at 16-17%, compared to about 20% in

1985 and 1987. Weekly drinking of spirits has steadily risen since 1989 (6%) to rates equaling the peak of 1985 (about 9.5%). For 9th graders, rates have been more variable. They have declined since 1993, when the rates were 10% for beer and 7% for spirits.

Trends for any alcohol use are virtually identical to those for beer, which would be expected because it is the most popular alcoholic drink. For 9th graders, the alcohol rate has dropped only 1 point since 1995 but 5 points since 1993 (from 14%). For 11th graders, it has held constant at 20%.

**FIGURE 4**  
**Weekly Use of Beer and Spirits, Past Six Months, Grades 9 and 11, Since 1985**



## *Heavy Drinking Patterns*

Some students may drink regularly but only in small amounts, while others may drink less often but at a heavier level per occasion. Since 1991, the CSS has asked respondents four questions to assess the level of heavy alcohol involvement: (a) frequency of binge or episodic heavy drinking, (b) liking to drink to feel it a lot or to get really drunk (drinking style), (c) ever been intoxicated from alcohol, and (d) the number of times physically sick from drinking. Among high school students, compared to 1995, binge drinking had increased but the other indicators showed signs of improvement.

### **Binge Drinking**

Table 6 reports the number of times in the previous two weeks that respondents had five or more drinks on the same occasion, a standard indicator of binge or episodic heavy drinking. Substantial numbers of older secondary school students engaged in this high-risk behavior on at least one occasion: 20% of 9th graders and 25% of 11th graders. Half of 9th graders and more than half of the 11th graders who had engaged in any binge drinking in the past two weeks had done so two or more times (8% of 9th graders and 15% of 11th graders), suggesting this is normal weekend behavior.

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Unlike overall and weekly prevalence rates, this heavy drinking indicator rose in all three grades since 1995, one of the few measures to show such an increase. There was about a 2-point increase in grades 7 and 9, and almost a 4-point increase in grade 11.

**TABLE 6**  
**Consumed Five or More Drinks in a Row in the Past Two Weeks**

Frequency	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
One time	5.3	6.0	7.9	10.2	9.6	10.3
Two times	1.9	2.6	4.9	4.7	5.1	6.6
Three or more times	1.0	1.4	4.5	4.9	7.1	8.5
Total	8.2	10.0	17.3	19.8	21.8	25.4

### Drinking Styles

The percentage of respondents that liked to drink enough to "really" feel the effects of alcohol (beyond a sip or two) increased markedly with grade level, from 19% of 7th graders to 48% of 11th graders (Table 7). Only 7% of 7th graders, but 14.5% of 9th graders and 25% of 11th graders, reported that they drank *to feel it a lot or to get very drunk*. There has been some fluctuation in this *feel-a-lot/get-drunk* measure since 1995, but no consistent trend across grade levels. Rates increased by 3 points in grade 7, decreased by 4.5 points in 9th, and remained approximately stable in 11th. In contrast, among high school students rates increased between 1991 and 1995, from 13% to 19% for 9th graders, and from 19% to 26% for 11th graders.

**TABLE 7**  
**How Respondents Like to Drink (Styles)**

	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Sip or two	28.6	26.3	24.4	24.9	16.9	20.4
Feel a little	13.4	12.3	22.5	20.6	28.2	23.1
Feel a lot/until drunk	3.9	7.1	19.1	14.5	25.8	24.8

### Intoxication

The CSS asked respondents two questions to assess their lifetime history of alcohol intoxication. The first was the frequency they had ever been *very drunk* or *sick* after drinking alcohol. Consistent with the findings for weekly drinking and drinking styles, the intoxication rate about doubles between each grade. Almost 1 in 10 of 7th graders (9%), 21% of 9th graders, and 37.5% of 11th graders have been *very drunk* or *sick* at least once in their lives (Table 8). Of those drunk at least once, one-quarter in 7th



grade, one-third in 9th grade (32%), and more than one-third in 11th grade (36.5%) have been intoxicated three or more times.

Compared to 1995, the overall rate in 7th grade remained stable. In both 9th and 11th grades, there was a moderate decline (down 4 points). The proportions for very drunk three or more times were about the same as in 1995, with no consistent trend during the period 1991-95.

**TABLE 8**  
**Very Drunk or Sick from Drinking**

Frequency	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
1-2 times	7.7	7.0	17.4	14.2	25.3	23.7
3-6 times	1.1	1.2	4.5	4.2	8.2	6.5
7 or more times	0.6	1.2	3.5	2.4	8.0	7.2
Total	9.4	9.4	25.4	20.8	41.6	37.5

In a separate question, respondents reported the age they first felt intoxicated from an alcoholic beverage (if ever). As would be expected, the overall prevalence rates for each grade for any alcohol intoxication were higher than those recorded for being very drunk or sick. A substantial proportion in grades 7 and 9, and a clear majority by grade 11, perceived that they had experienced alcohol intoxication at least once (Table 9).

**TABLE 9**  
**Any Alcohol Intoxication at Least Once, by Age and Grade Level**

Age	1995-96 (%)	1997-98 (%)
7th graders by age 12	21.5	20.1
9th graders by age 14	46.2	44.9
11th graders by age 16	63.0	58.5

- One-fifth of respondents in 7th grade (20%), more than 4 in 10 in 9th grade (45%), and almost 6 in 10 in 11th grade (58.5%) had been intoxicated by the modal ages for each grade (respectively, ages 12, 14, and 16).
- Among those who ever had consumed at least one whole alcoholic drink, intoxication rates rose to 39% of 7th graders, 61% of 9th graders, and 73% of 11th graders (not in Table 9).

Consistent with the results for being *very drunk/sick*, there was stability in these rates in grades 7 and 9, and a 4-point decline in grade 11. This contrasts with a rising trend between 1989 and 1993.

In interpreting these findings, keep in mind that these are self-perceptions. Youth may interpret what constitutes drunkenness differently than adults would due to their lack of use experience. It is to help adjust for this idea that the qualification of *very drunk*

or sick was added. Because of their lower body weight, youth also generally require less alcohol than adults to experience inebriation. This is particularly true for females.

### *Cessation Attempts*

As evident from the differences between lifetime and 30-day rates, not all students who try alcohol become regular users. However, relatively few high school respondents who tried alcohol reported making even one effort to stop (Table 10). Moreover, although drinking rates increased with age, the cessation-attempt rate decreased. There was little difference between current results and 1995. The following was found among lifetime drinkers:

- Only 20% in 9th grade and 17.5% in 11th grade ever reported one or more cessation attempt.
- The majority made only one effort (14% and 11%, respectively).
- An additional 4% to 6% marked *don't know*. Since they did not mark *none*, it is assumed this reflects at least some effort to not drink. Combining the *don't know* rate with total attempts suggests that somewhat less than one-quarter of drinkers in each grade may be open to intervention efforts designed to support use cessation.

**TABLE 10**  
**Attempts to Stop Using Alcohol, Grades 9 and 11, Users Only**

Frequency	Grade 9		Grade 11	
	1995 (%)	1997 (%)	1995 (%)	1997 (%)
None, but do use	74.4	76.6	76.7	76.8
Total any attempt	19.3	19.7	18.2	17.5
One Time	12.5	13.6	11.4	10.9
Two or three times	4.4	3.2	4.3	5.1
Four or more times	2.4	3.0	2.4	1.5
Don't know	6.3	3.7	5.1	5.7

### *Drinking and Driving*

Table 11 reports the proportion of 9th and 11th graders who had driven a car when drinking or had been in a car with "friends who were drinking and driving." This assesses the level at which youth place each other at risk based on their own (not adult) drinking and driving.

# ALCOHOL USE

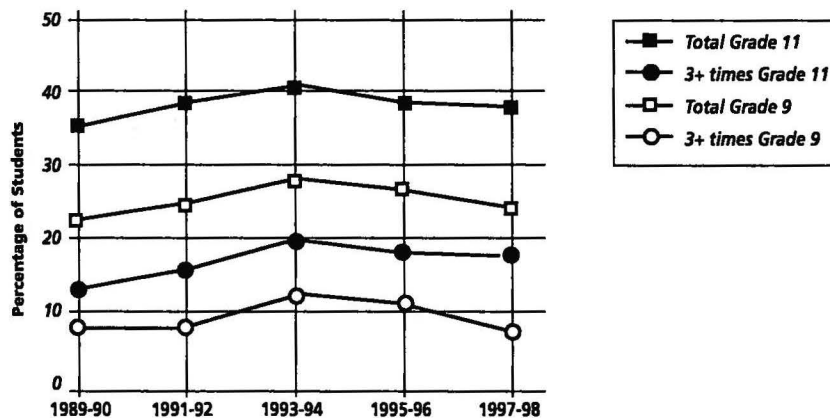
- Twenty-three percent of 9th graders and 37.5% of 11th graders reported at least one drinking and driving experience in their lifetime.
- Among these youth, 31% of 9th graders and 47% of 11th graders had three or more drinking and driving experiences (or 7% and 17.5%, respectively, of the total sample).

**TABLE 11**  
**Involvement in Drinking and Driving in Lifetime, Grades 9 and 11**

	Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Frequency				
One or two times	14.9	16.2	20.1	20.0
Three to six times	4.0	3.1	7.1	7.4
More than six times	7.0	4.1	10.4	10.1
Total ever	25.9	23.4	37.5	37.5

Figure 5 illustrates that, in both grades, drinking and driving experiences rose steadily between 1989 and 1993 (when prevalence rates peaked at 28% and 41%). Since then, rates for both *any experience* and *three or more* have steadily declined for 9th graders. There has been a 5-point drop since 1993, returning to the survey low reported in 1989. For grade 11, rates declined slightly in 1995 and remained flat in 1997. Despite these recent improvements, overall prevalence rates are still higher today than in 1985, when they stood at 23% and 35%.

**FIGURE 5**  
**Drinking and Driving Experiences During Lifetime, Grades 9 and 11, Since 1989**



Because 7th graders are well under the legal age for drinking or driving, the CSS asked them only whether they had ever been in a car with “someone who was drinking and driving.” This provides a gauge of the extent to which other people’s drinking and driving place youth at risk. There was essentially no change between 1995 and 1997. Thirty-six percent of 7th graders had at least one such experience in 1997, compared to 37% in 1995. These contrast with 45% in 1991.

### *Problems Caused by Use of Alcohol*

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Since 1993, the CSS has asked high school students whether they had ever experienced any of 11 problems as a result of consuming alcohol or other drugs. Table 12 lists the alcohol-associated problems for the total sample at grades 9 and 11, as well as those juniors who drank regularly (weekly or more frequently). The results are similar or slightly lower than in 1995.

#### **Total Sample**

About 4 in 10 high school students reported drinking but having no problems from alcohol. One-fifth (21%) of 9th graders and 28% of 11th graders reported at least one problem. The most frequently cited problems were memory loss and passing out, both of which are experiences associated with severe alcohol intoxication. Both of these are experiences associated with severe alcohol intoxication, which are likely to leave a lasting impression. It is likely that other problems on the list are underestimated, however. The psychological denial so frequently associated with excessive drinking might suppress awareness that alcohol was directly associated with other problems such as poor grades, getting into trouble, or having conflicts with parents and peers.

- Adverse *pharmacologic* effects. Students most commonly selected the two indicators of adverse pharmacological effects. *Forgetting what happened* was reported by 10% of 9th graders and 16% of 11th graders, and *passing out* by 7% of 9th graders and 13% of 11th graders.
- Among other problems, *conflict with parents*, *conflict with other kids*, and *harm to school work* were reported by 3% to 4% of 9th graders and 5% to 6% of 11th graders. About the same percent indicated experiencing another problem other than those listed.

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TABLE 12

**Problems Ever Caused by Alcohol for Total Sample, Grades 9 and 11, and Heavy Drinkers, Grade 11**

Problem	Grade 9 Total Sample		Grade 11 Total Sample		Weekly Drinkers <sup>a</sup>	
	1995/96 (%)	1997/98 (%)	1995/96 (%)	1997/98 (%)	1995/96 (%)	1997/98 (%)
Get a traffic ticket	0.4	2.4	1.2	1.9	5.3	3.1
Get arrested	1.7	1.6	2.2	2.9	9.8	7.3
Have money problems	2.6	3.5	5.0	5.1	117.2	16.2
Get into school trouble	3.3	2.2	2.6	2.6	5.7	7.0
Hurt your school work	4.7	3.0	7.0	5.1	28.3	18.3
Fight with other kids	4.9	3.6	5.3	5.3	15.5	12.4
Fight with parents	5.9	3.8	7.4	5.8	24.4	14.0
Damage a friendship	4.5	2.7	4.6	4.6	10.7	9.5
Pass out	8.0	6.5	15.1	13.2	38.8	39.4
Forget what happened	10.9	9.6	16.7	15.7	46.7	37.7
Other <sup>b</sup>	7.3	6.3	8.0	6.8	16.4	17.3
Used alcohol but never had any problems	41.3	38.5	43.5	43.1	29.0	34.2
Total any problem	21.7	21.2	30.9	28.1	73.6	64.4

<sup>a</sup>Once a week or more frequently.

<sup>b</sup>"Other" was added in 1995-96.

## Weekly Drinkers (Grade 11)

Table 12 also shows that problem rates increased considerably among weekly alcohol users in grade 11. They were about two to three times higher than those reported by the total sample of 11th graders. The biggest differences were in regard to pharmacological effects.<sup>1</sup>

- **Any Problems.** Almost two-thirds of weekly drinkers (64%) had experienced one or more problems. Although weekly users amounted to 27% of drinkers in 11th grade, they were three times more likely than the total sample to have experienced some problem.
- **No Problems.** One-third (34%) of weekly drinkers reported never having any problems, 9 points (21%) lower than reported by the total sample.
- **Adverse Pharmacologic Effects.** Almost 4 in 10 weekly drinkers (38%) had experienced *memory loss*; 39% had *passed out* at least once, three times the total sample.
- **School Problems.** The next most frequently reported problem was *hurting school work*, cited by 18% of weekly drinkers (more than three times the total rate).

- **Fighting.** Fourteen percent of weekly drinkers reported *fighting with their parents* and 12% *fighting with other kids*. In addition, 9.5% reported it *damaged a friendship*. These rates were more than twice those for the total sample.

Because friends are extremely important to young people, attention should be paid to any youth who have had fights or damaged friendships because of alcohol use. Convincing young people that alcohol use can endanger friendships may help prevention efforts.

Because the results for the grade 11 sample in Table 12 *include* responses for weekly drinkers, this group undoubtedly account for most of the reported problems with alcohol. They represent critically important risk groups deserving of special attention in prevention and intervention programs.

### *Perceived Harm*

Respondents were asked to indicate how harmful it was to consume alcohol frequently, defined as daily or almost daily. The 5-point response scale ranged from extremely harmful to harmless. As reported in Table 13, perceived harm dropped markedly with older students.

**TABLE 13**  
**Perceived Harm of Frequent Use of Alcohol (Daily or Almost Daily)**

Harm Rating	1995-96 (%)	1997-98 (%)
<b>Extremely Harmful</b>		
Grade 7	35.3	45.8
Grade 9	28.4	34.7
Grade 11	36.4	35.8
<b>Harmless*</b>		
Grade 7	10.2	8.2
Grade 9	12.4	10.6
Grade 11	7.1	7.3

\*Derived by combining the percentage of respondents who selected "Mainly Harmless" and "Harmless."

- Only about 10% or less across grades thought frequent alcohol use was *harmless*.
- Almost half of 7th graders (46%) rated frequent alcohol use as *extremely harmful*.
- For high schoolers, the rate declined to only slightly more than one-third of 9th and 11th graders (35% and 36%, respectively).

Although unchanged since 1995 in grade 11, in grades 7 and 9 *extremely harmful* perceptions increased notably, and those for *harmless* may have declined slightly. However, *extremely harmful* results for both years were below the peaks reported in 1993 for all grades (58%, 54%, and 63%, respectively).

### *Perceived Availability*

Respondents reported on how easy or difficult it was for students in their grade level to get alcohol. The results in Table 14 vividly illustrate that the high prevalence of

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drinking is facilitated by the easy availability of alcohol to youth under the legal drinking age. Perceived ease of availability also increased notably with age.

- The combined percentages of respondents who thought that it was either *very easy* or *fairly easy* were 37% for 7th graders, 66% for 9th graders, and 79% for 11th graders.
- One-third of 9th graders and almost half of 11th graders thought alcohol was *very easy* to obtain, but only 18% of 7th graders.
- Seventh graders were four times more likely than 11th graders to report that they did not know how available alcohol was (36% vs. 9%).

**TABLE 14**

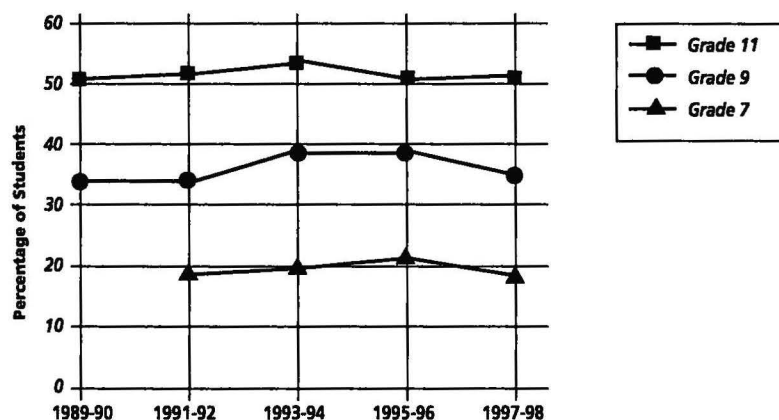
**Perceived Difficulty in Obtaining Alcohol**

Degree of Difficulty	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Very easy	23.9	18.3	40.5	33.3	48.1	47.2
Fairly easy	20.8	18.6	34.2	32.3	35.3	32.1
Fairly difficult	13.6	12.7	8.1	9.9	6.1	6.4
Very difficult	9.1	14.8	3.8	8.1	3.3	5.3
Don't know	32.6	35.6	13.5	16.4	7.2	9.1

As shown in Figure 6, the 1997 rate for *very easy* was lower in grades 7 and 9 than in 1993 or 1995. For grade 11, it was consistent with the last survey but still lower than in 1993.

**FIGURE 6**

**Perception that Alcohol is Very Easy to Obtain, Since 1989**



### ENDNOTES

- 1 We also ran the same analysis on those students who were binge drinkers (five drinks in a row), with similar results.

# 3

## Drug Use

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**Students in all grades perceived frequent marijuana use to be more harmful than frequent drinking, but the difference narrowed dramatically with age. In all grades, there has been a downward trend in perceived harm.**

**T**his section presents the results for drugs other than alcohol or tobacco. Marijuana's popularity continues to be the highest ever reported, but the sharp increases in use that occurred between 1991 and 1993 have ended. Between 1995 and 1997, use remained flat. Overall drug use and polydrug use, two measures influenced by marijuana use rates, also held steady. Students reported few increases in any other drug use measure as well, but the level of involvement remains high. The following were among the findings:

- Eleven percent of 7th graders, 32.5% of 9th graders, and 42% of 11th graders reported marijuana use in the past six months; 2%, 9%, and 14%, respectively, on a weekly basis.
- Almost one-fifth of 9th graders (18%) and one-quarter of 11th graders (26%) were current users of marijuana.
- Almost one-fourth of 9th graders (24%) and 29.5% of 11th graders, were current users of some drug.
- Sixteen percent of 9th graders and 20% of 11th graders experienced one or more life problems related to drug use.
- Students in all grades perceived frequent marijuana use to be more harmful than frequent drinking, but the difference narrowed dramatically with age. In all grades, there has been a downward trend in perceived harm.



- The percentage of high school students who perceived drugs to be easy or very easy to obtain was approximately the same as for alcohol.
- Well over half of 11th graders (59%) knew one or more adults who used marijuana regularly.
- By 9th grade, 59% of students believed half or more of their classmates had tried marijuana.

## *Use Prevalence*

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### **Past Six Months**

The use of 11 classes of drugs and total drug use in the preceding six months is summarized in Table 15. Marijuana is by far the most popular drug among secondary students. However, less than half of drug users in each grade restricted their use to only marijuana. Twenty-three percent of 7th graders, 30% of 9th graders, and 30.5% of 11th graders reported use of a drug other than marijuana. In the 7th grade, this was primarily accounted for by inhalants. In the 9th and 11th grades, drug use was more diversified.

- **Any Drug.** Overall use of any drug in the past six months was reported by more than one-fourth of 7th graders (27%), more than 4 in 10 of 9th graders (43%), and almost half of 11th graders (49%).
- **Marijuana.** Marijuana use rose almost fourfold between 7th and 11th grade, from 11% to 42%.
- **Inhalants.** As in the past, the broad class of inhaled substances (e.g., sniffing glue, paint, butane, gasoline, amyl nitrate, rush, poppers, laughing gas) was second to marijuana in usage among 9th and 11th graders, and the most frequently used in grade 7. This is the only class of substances in which use is higher in 7th grade (18%) than in the 11th grade (15%).
- **Stimulants.** Use of stimulants (methamphetamines and cocaine), the next most popular class of drugs, was considerably less common. Eight percent of 9th graders and 12% of 11th graders reported methamphetamine use. Use of cocaine (including crack) was lower at 6% of 9th graders and 8% of 11th graders.
- **Psychedelics, Depressants, and Other Drugs.** Other substances used by 5% or more of 11th graders were LSD (10%), other psychedelics (7%), and tranquilizers (6%). In 9th grade, the only other drugs were LSD (6%) and PCP (5.5%). Only about 3% or less of 7th graders used any other drug.

# DRUG USE

TABLE 15

## Marijuana and Other Drug Use, Past Six Months

Substance	Grade 7		Grade 9		Grade 11	
	1995-96 %	1997-98 %	1995-96 %	1997-98 %	1995-96 %	1997-98 %
Any drug	26.2	27.2	43.1	43.4	49.4	48.7
Marijuana	10.9	11.2	34.2	32.5	42.8	41.6
Any other drug <sup>a</sup>	21.0	22.8	31.7	30.1	28.0	30.5
Methamphetamines <sup>b</sup>	2.5	2.6	10.8	8.0	10.4	12.0
Cocaine	1.8	3.1	6.4	5.7	7.2	7.9
Inhalants	15.6	18.3	21.9	21.1	14.7	14.8
LSD	2.2	1.8	9.9	5.9	10.8	9.8
Psychedelics <sup>c</sup>	1.0	1.2	3.7	2.9	6.2	7.0
Tranquilizers	2.0	2.6	6.7	4.3	5.3	5.8
PCP	3.5	3.6	6.1	5.5	4.1	4.6
Heroin	1.6	1.5	2.9	1.9	2.2	1.7
Other narcotics	3.1	2.2	7.6	4.5	7.7	7.2

<sup>a</sup>Any drug other than marijuana.

<sup>b</sup>Or other amphetamines.

<sup>c</sup>Other than LSD.

### Twelve-Year Trends (Six-Month Prevalence)

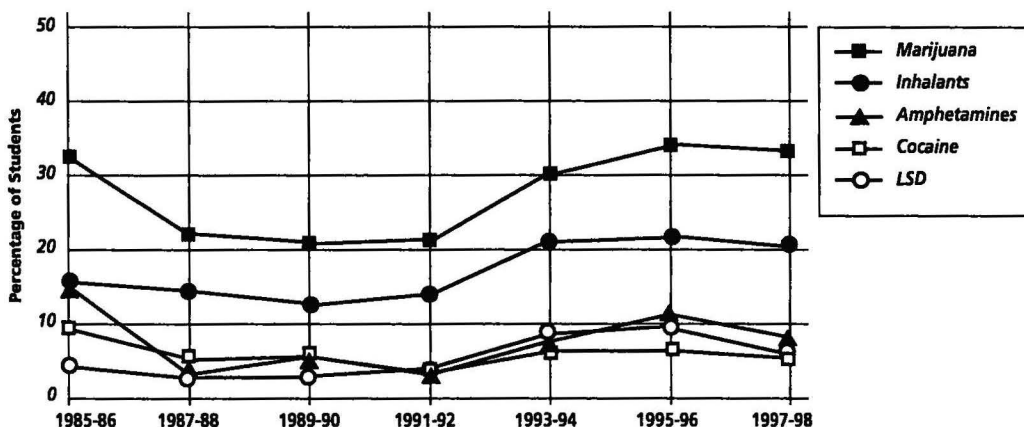
Drug use among 7th graders has been relatively stable since 1985, with the main shifts in marijuana and inhalants. Trends among 9th and 11th graders which are similar, are illustrated in Figures 7 and 8. Perhaps most significant, a long-term rise in marijuana use that began in 1991 appears to have stabilized. Nevertheless, in all three grades, marijuana use rates are still at survey highs. Also warranting attention is the shift that has occurred between methamphetamine and cocaine use. Cocaine is unique in showing the most sustained drop in popularity of any of the major drugs, although this drop has bottomed out in recent surveys.

- **Marijuana.** Use of marijuana has followed a similar pattern in 9th and 11th grades. The high levels of use recorded in the first survey (1985) dropped significantly from successive surveys until a rising trend began in 1991 for grade 9 and in 1989 for grade 11. This rising trend continued through 1995, when rates were virtually identical to the highs registered in the first survey. The 1997 rates were the same as those in 1995. Among 7th graders, the current rate is the same as in both 1993 and 1995. However, this is technically the highest level recorded in the survey, although the original rate of 10% in 1985 was not significantly lower. Marijuana use by 7th graders bottomed at 6% in 1987.

## DRUG USE

- **Inhalants.** Peak inhalant use by 7th graders registered 18% in 1985. After declining by about one-third during the intervening years, it began to rise again in 1991 and now equals the peak 1985 rate. Among 9th and 11th graders, the moderately lower use rates in 1985 (16% and 14%, respectively) also sagged until 1991, and then began to increase until stabilizing between 1995 and 1997. Despite the fluctuations, the only real difference between 1997 and 1985 is a marginal increase of 2 points among 9th graders, with respondents in 7th and 11th grade at exactly the same level of use now as then.
- **Cocaine.** The percentages using cocaine were highest in the first survey (1985), at 10% for 9th graders and 18% for 11th graders. Use of this drug declined significantly afterwards, with moderate fluctuation from survey to survey. By 1993, cocaine use in 11th grade had dropped 13 points. Rates have been flat since then, suggesting this decline has bottomed.
- **Methamphetamine.** Methamphetamine use has been much more stable than cocaine. Since 1993, it has been used by marginally-to-significantly more students (depending on grade) than cocaine. "Meth" use was reported in 1985 by 10% of the students in grade 9 and 15% in grade 11. Twelve years later, it registers at 8% for 9th grade and 12% for 11th grade. The latter is marginally the highest level recorded since 1985, but still lower than the earliest figure.
- **LSD.** In 1985, LSD use registered at 4% for 9th graders and 6% for 11th graders. Among 9th graders, use rates remained stable until a rise began in 1993 that ended in 1995 at 10%. Eleventh-grade rates began at 6% in 1985, remained stable until 1991, and then rose to 11% in 1995. The current percentage is marginally lower than in 1995 for grade 9, but 2 points higher in grade 11.

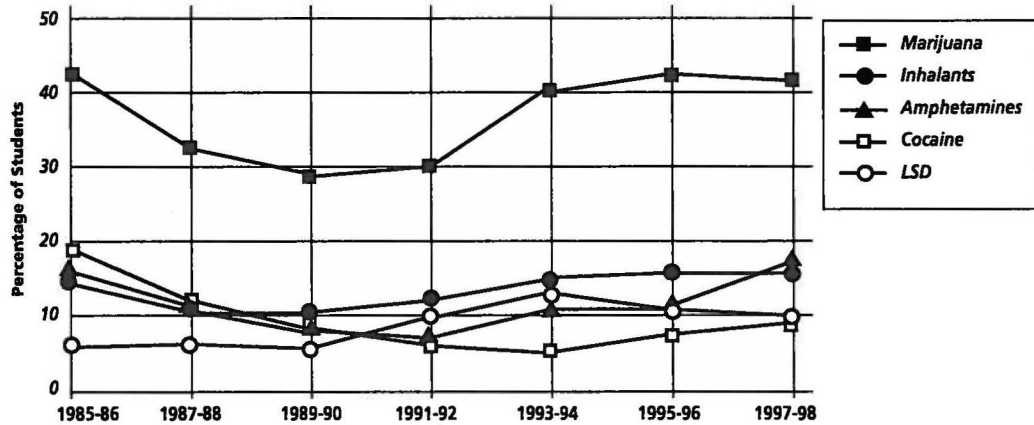
**FIGURE 7**  
**Drug Use, Past Six Months, Grade 9, Since 1985**



## DRUG USE

FIGURE 8

### Drug Use, Past Six Months, Grade 11, Since 1985



### Lifetime Use

Lifetime drug use rates were also very similar to those of 1995, with the direction of any change being a slight reduction (Table 16). As with alcohol, there is little difference between lifetime and six-month rates.

- **Any Drug Use.** In 7th grade, 24% of respondents reported trying a drug at least once, with the rate rising to 48% in 9th grade and 52.5% in 11th grade.
- **Marijuana.** Eleven percent of 7th graders, 33% of 9th graders, and 46% of 11th-grade respondents reported using marijuana at least once.
- **Inhalants.** About one-sixth (17%) of 7th graders reported inhalant use, 25% in grade 9, and 20% in grade 11.
- **Other Drugs.** Similar proportions of students reported lifetime use of methamphetamines, psychedelics, and other drugs. Across these categories, rates varied between about 2% and 6% in grade 7, 6% and 10% in grade 9, and 13% and 15% in grade 11.

TABLE 16

### Lifetime Use of Marijuana and Other Drugs

Drug	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Marijuana	10.9	11.3	35.0	32.8	46.9	46.3
Inhalants	18.2	16.9	26.7	24.9	22.6	20.2
Cocaine/crack <sup>a</sup>	2.2	2.4	7.0	-	10.1	-
Amphetamines	1.9	2.9	9.7	10.1	13.5	13.9
Psychedelics	2.0	2.0	8.4	5.8	13.6	13.4
Other drugs	6.5	6.3	14.0	9.5	14.6	14.5
Any drug use	25.9	24.4	46.3	47.9	54.8	52.5

<sup>a</sup>Because of a variation in item placement, the results for cocaine in 1997 were not reliable.

## DRUG USE

These results underscore the normative perceptions students are likely to have about the acceptability of drug use among their peers, especially older peers. That more than half (52.5%) of 11th graders had tried a drug means that drug experimentation, if only once or a few times, has become “normal” in a purely statistical sense and possibly also in a social sense for many students.

Students were also asked specifically to recall the age at which they first tried a drug. Table 17 shows that the aggregated percent of students who tried any drug by the modal age for each grade (12, 14, and 16 years respectively) was considerably lower than the total drug use rates in Table 17. Using this less precise method, the lifetime rates were 15.5% in 7th grade, 35% of 9th grade, and 49% of 11th grade.

**TABLE 17**  
**Use of a Drug at Least Once by Modal Age for Grade**

Grade and Age	1995-96 (%)	1997-98 (%)
7th graders by age 12	17.0	15.5
9th graders by age 14	40.7	35.3
11th graders by age 16	51.5	49.2

### Current (30-Day) Use

Table 18 summarizes current rates of use of six classes of drugs and total drug use in the 30 days before the survey. With the exception of marijuana and inhalants, very few 7th graders reported current drug use. Even in grade 11, only 5% to 7% reported use of any other drug besides marijuana.

- **Any Drug.** Any drug use was registered by 11% of 7th graders, 24% of 9th graders, and 29.5% of 11th graders.
- **Marijuana and Inhalants.** Marijuana easily accounted for most drug use in grades 9 and 11, at 18% and 26%, respectively. Seventh graders used inhalants and marijuana in about the same proportions (about 8%). Eleventh graders reported the lowest rate for inhalants (6%).
- **Other Drugs.** Eleventh graders reported use of methamphetamines and psychedelics at about the same rate as for inhalants (6% and 5%, respectively). They were used by 3% of 9th graders.

Compared to 1995, overall rates across drug categories and grades decreased or remained stable, except for a very slight rise for *methamphetamines* in 11th grade. Most notably, among 9th graders, there was a substantial drop in both *total current drug use* (29% to 24%) and *marijuana* use (24% to 18%). *Any drug use* also declined slightly among 7th graders.

For both grades 9 and 11, the current-use rates for marijuana were about 55% of the lifetime rates. This suggests that about half of high school students who try marijuana do not progress to regular use, about the same proportion as found for alcohol.

## DRUG USE

TABLE 18

### Current (Last 30 Days) Use of Marijuana and Other Drugs

Drug	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Marijuana	6.2	7.5	23.6	18.1	25.9	25.7
Inhalants	7.3	7.8	10.4	8.5	6.8	5.8
Cocaine/crack <sup>a</sup>	0.9	2.0	2.6	-	3.6	-
Methamphetamines	0.7	1.7	3.2	3.4	4.5	5.9
Psychedelics	0.6	1.4	3.8	3.1	6.0	4.9
Other drugs	3.4	3.5	7.9	8.0	7.0	7.2
Any drug use <sup>b</sup>	13.3	11.4	29.4	24.1	30.8	29.5

<sup>a</sup>Because of a variation in item placement, the results for cocaine in 1997 were not reliable.

### Regular and Heavy Use

To assess the level of use involvement, the frequency of monthly and weekly use in the past six months was calculated and students were asked about their history of lifetime drug intoxication.

#### Monthly and Weekly Use (Past Six Months)

Table 19 provides rates for use of marijuana, inhalants, cocaine, and methamphetamines at least once a month and once a week during the past six months. Few students in grade 7 reported monthly or weekly use of any drug, with the percentages at or below the chance level. Among older students, only marijuana was used by more than 3% of students on a monthly basis.

- In 9th grade, 13% reported monthly marijuana use; in 11th grade, 19%.
- Weekly rates were only 4 and 5 percentage points lower, respectively. This suggests that the clear majority of older adolescents who escalate to using marijuana at least once a month, will use it once a week, as was found for alcohol.

Long-term trends in weekly marijuana use parallel those for overall marijuana prevalence, as Figure 9 shows. This suggests that efforts to reduce overall marijuana use prevalence will also reduce the proportion of regular users. Weekly rates declined in the late 1980s from initial peaks of 9% and 13% in 1985. These declines were eliminated by 1993, and new peaks were reached in 1995 (12% and 16.5%). For 1997, however, there was a return down to 1985 and 1993 levels.

- The leveling off in total marijuana use in 1997 was accompanied by moderate declines in weekly use of 3 percentage points in grade 9 (to 9%) and 2 points in grade 11 (to 14%).

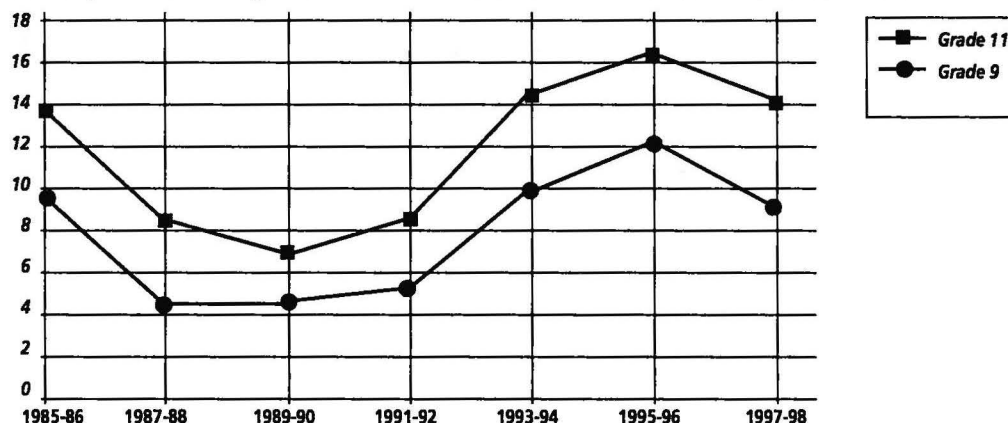
## DRUG USE

In recent years, weekly use of marijuana has exceeded or equaled weekly beer drinking, whereas in the late 1980s it was lower. For 1997, it was slightly higher in grade 9 (7% for beer), but slightly lower in grade 11 (17% for beer).

**TABLE 19**  
**Monthly and Weekly Drug Use, Past Six Months**

Substance	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
<b>Monthly Use</b>						
Marijuana	2.9	3.0	16.2	13.0	21.6	19.2
Inhalants	1.7	2.0	2.7	3.6	1.3	1.7
Amphetamines	0.3	0.3	2.5	1.8	3.5	3.2
Cocaine	0.4	0.6	1.2	0.9	1.7	1.7
<b>Weekly Use</b>						
Marijuana	1.9	2.1	12.3	9.3	16.5	14.1
Inhalants	1.4	1.4	1.3	1.8	0.5	1.0
Amphetamines	0.3	0.2	0.9	1.1	2.0	2.4
Cocaine	0.4	0.4	0.5	0.5	1.1	0.7

**FIGURE 9**  
**Weekly Use of Marijuana, Past Six Months, Grades 9 and 11, Since 1985**



### Lifetime Intoxication

Table 20 reveals that 11% of 7th graders, 32.5% of 9th graders, and 43% of 11th-grade students recalled being intoxicated on a drug by the grade modal age. When compared to the lifetime drug-use rates in Table 16, these results suggest that about two-fifths of 7th-grade users, two-thirds of 9th-grade users, and four-fifths of 11th-grade users had been high or intoxicated at least once (see also Figure 10).

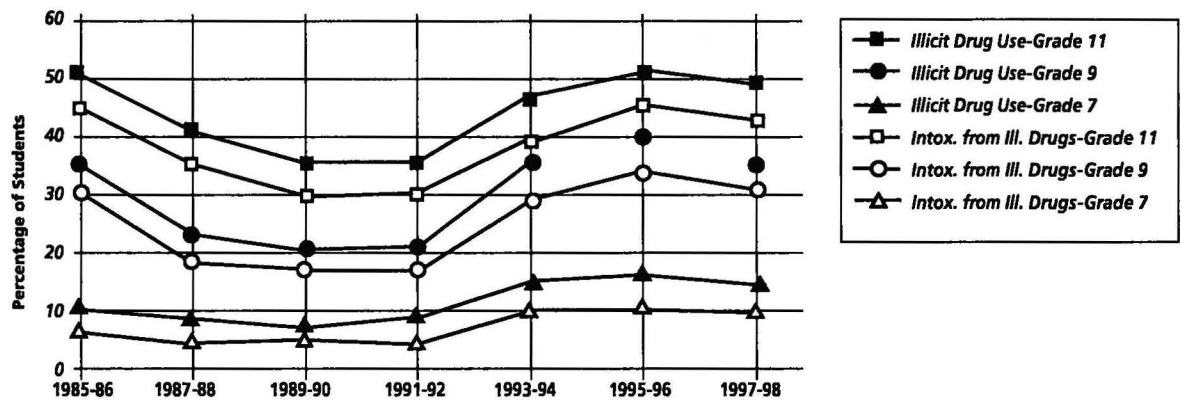
**TABLE 20**  
**Any Intoxication from Drugs, at Least Once, by Age and Grade Level**

Grade and Age	1995-96 (%)	1997-98 (%)
	(%)	(%)
7th graders by age 12	11.8	10.7
9th graders by age 14	34.3	32.5
11th graders by age 16	45.6	42.9



Figure 10 illustrates that there has been a consistent relationship between any drug use and intoxication since 1985, with variations in the rates for both measures occurring in tandem. This mirrors the relationship for marijuana between any use and weekly use. Among 9th graders, drug intoxication declined from a peak of 30% in 1985, to a low of 18% in 1989; then rising to a new peak in 1995 of 34%. For 11th graders, the range was from 45% in 1985, to 31% in 1989; then rising to 46% in 1995. Since the last survey, the percentage of those who had ever been intoxicated declined marginally in grade 9 and by about 3 points in grade 11. This may portend an end to the upward trend that began after 1991. However, current rates are still the second highest since 1985.

**FIGURE 10**  
**Any Drug Use and Intoxication from Drugs, Since 1985**



### *Estimation of Marijuana Use Among Peers*

Research on adolescents has shown that the spontaneous modeling of peers is a powerful influence on youth substance use. Thus the perception of substance use among peers is an important social influence to assess. In 1997, students were asked for the first time to estimate how many of their same-age peers ever used marijuana and used it once a month or more often. Students were given general groupings as response options (one-tenth, quarter, half, etc.). Reflecting the pervasiveness of marijuana use in adolescent culture, the proportion of respondents who felt they didn't know how many peers were users dropped dramatically between grades 7 and 9 (from 42% to 16.5%), as shown in Table 21. Moreover, the majority of upper graders believed that use was normative in a statistical sense.

- **Lifetime Use.** The proportion who believed that 50% or more of their classmates had used marijuana at least once rose from 21% in grade 7 to 59% in grade 9, and rose further to 68% in grade 11.



## DRUG USE

- **Monthly Use.** Close to half of the older students (43% in 9th grade and 49% in 11th grade) believed that 50% or more of their classmates used marijuana at least once a month. Estimates exceeded actual use rates in each grade, with the degree of overestimation increasing with age.
- **Lifetime Peer Use.** For 7th graders, 36% of respondents estimated that 1 in 4 or more of their peers had tried marijuana, whereas the actual rate was closer to 1 in 10. In grade 9 (actual use 33%), about 59% overestimated that 1 in 2 had tried marijuana; in grade 11 (actual use 46%), about 68% also overestimated that 1 in 2 had tried it.
- **Monthly Peer Use.** The actual reported six-month monthly use rates were 13% for 9th graders and 19% for 11th graders (Table 19). About 60.5% and 74% of respondents, respectively, overestimated (selected 25% or more).

Even assuming some youth might underreport their marijuana use, these differences are so large they would support the theory that youth overestimate use prevalence and that normative education approaches will help reduce initiation rates. This is discussed further in the Conclusion (see p. 78).

**TABLE 21**  
**Estimated Use of Marijuana Among Peers**

	Perceived (Estimated) Percent of Users <sup>a</sup>						
	Don't know (%)	10% or less (%)	25% or more (%)	50% or more (%)	60% or more (%)	75% or more (%)	Over 75% (%)
<b>7th Grade</b>							
Ever tried	41.6	22.9	35.6	21.1	15.2	9.6	6.0
Once a month or more	-	-	-	-	-	-	-
<b>9th Grade</b>							
Ever Tried	16.5	9.9	73.6	58.7	46.3	33.1	20.3
Once a month or more	23.1	16.4	60.5	42.7	27.0	17.4	10.1
<b>11th Grade</b>							
Ever tried	11.4	4.9	83.7	68.2	55.9	40.4	24.3
Once a month or more	14.1	12.3	73.7	48.9	31.1	18.7	10.8

<sup>a</sup>For comparison to reported marijuana use, past 30 days, see Table 18; for lifetime use (ever), see Table 16; for monthly use (past six months) see Table 15.

## Cessation Attempts

The survey has consistently shown that higher proportions of high school students try to stop use of drugs than of alcohol. The percent of users reporting attempts to stop using drugs (Table 22), was almost 1.5 times higher than those of alcohol (Table

10) for 9th graders and slightly more than two times higher for 11th graders. Whereas attempts to stop alcohol use declined slightly between grades 9 and 11, they rose for drugs by an even greater amount (10 points).

- Twenty-eight percent of 9th graders and 38% of 11th graders who had used drugs had attempted to stop; 11% and 16%, respectively, had tried more than once.
- Including those users who marked *don't know* (but didn't select *none*), the cessation-attempt rate rose to 34% and 42%, respectively.

The cessation rate declined by 4 points since 1995 among 9th graders (from 32%), but rose by 6 points among 11th graders (from 32.5%). The reason for this difference is not apparent.

TABLE 22

**Attempts to Stop Using Marijuana and Other Drugs,  
Grades 9 and 11, Users Only**

Frequency	Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
None, but do use	60.3	65.9	60.6	57.6
Total any attempt	31.7	28.3	32.5	38.1
One time	20.2	17.3	19.4	22.0
Two or three times	8.2	6.9	9.8	11.3
Four or more times	3.3	4.0	3.3	4.7
Don't know	8.1	5.8	6.9	4.2

## *Problems Caused by Use of Drugs*

In Table 23, the problems associated with the use of marijuana or other drugs are reported for the total sample in grades 9 and 11 and for weekly marijuana users in grade 11. Respondents selected from the same list of problems as for alcohol (Table 12), except that *had a bad trip* replaced *passing out* and *forgetting what happened*. In general, problem rates for drugs were similar to those for alcohol. They were slightly lower than those reported in 1995, with the biggest decline for *hurting school work* (down 3 points for the total sample).

### **Total Sample**

Compared to alcohol (Table 12), the rates for drug use were lower for total any problem and, especially, for using but having no problems. This reflects the lower proportion of drug users than drinkers. Students cited money problems more frequently for drug use than for alcohol, although less so than in 1995. Other specific problem rates from drug use were similar to those from alcohol.

## DRUG USE

- *Any problem.* Sixteen percent of 9th graders and 20% of 11th-grade students experienced one or more problems associated with drug use. About the same percentages indicated that they used drugs but never had any problems (19% and 24%, respectively).
- The two most frequently cited problems were *had a bad trip* (6% of 9th graders and 8% of 11th graders), *hurt school work* (5% and 7%), followed by *money problems* (2% and 6%) and *fight with parents* (3% and 5%).
- About 5% in both grades also selected *other problem*.
- All other problems were reported by about 3% or less in both grades, with the lowest rates for *getting a traffic ticket* and *getting arrested* (about 2%).

**TABLE 23**

**Problems Ever Caused by Marijuana or Other Drug Use, Grades 9 and 11**

Problem	Grade 9		Grade 11			
	Total Sample		Total Sample		Weekly Marijuana Users <sup>a</sup>	
	1995/96 (%)	1997/98 (%)	1995/96 (%)	1997/98 (%)	1995/96 (%)	1997/98 (%)
Get a traffic ticket	0.5	2.0	0.8	1.5	2.2	3.1
Get arrested	1.5	1.8	1.9	2.1	6.7	8.1
Have money problems	4.0	2.3	7.5	6.2	30.5	22.5
Get into trouble at school	2.9	2.5	3.7	3.3	12.1	10.0
Hurt your school work	5.4	4.6	10.0	7.3	30.0	25.4
Fight with other kids	3.8	1.5	3.0	2.8	10.4	7.4
Fight with your parents	5.3	3.2	6.4	5.0	18.1	16.8
Damage a friendship	3.0	2.7	3.9	3.7	11.0	8.0
Had a "bad trip"	6.5	5.7	8.9	8.0	25.2	17.2
Other <sup>b</sup>	5.5	5.0	5.9	5.1	19.5	17.8
Used drugs but never had any problems	16.8	18.6	23.6	24.1	34.9	34.9
Total Any Problem	16.8	15.8	21.8	20.3	66.7	57.8

<sup>a</sup>Once a week or more frequently.

<sup>b</sup>"Other" was added in 1995-96.

### Weekly Marijuana Users (Grade 11)

Among 11th graders, drug-related problems were from two to almost four times higher among weekly marijuana users than among the total sample.

- *One or more problems* were reported by 58% of weekly marijuana users. This was almost three times the rate reported by the total sample.
- Only about one-third (35%) reported *using but having no problems*, almost the same as found for weekly alcohol users (34%).
- One in four reported having *money problems* (22.5%) and *hurt school work*

(25%), while *having a bad trip* and *fighting with parents* were both reported by 17% of weekly users.

- About 1 in 10 reported *trouble at school* (10%), *damaging friendships* (8%) and *fighting with other kids* (7%).

For most categories, especially the top three, the rates were noticeably lower than reported in 1995. However, the pattern was the same in that *hurting school work*, *money problems*, and *having a bad trip* were the three most common problems reported, in descending order.

Compared to the problems reported by weekly alcohol users (Table 12), weekly marijuana users were slightly *less likely* to have at least one problem (58% vs. 64%). *Hurting school work* was the most common for both groups, although the rate was down from 1995. Regular alcohol use appears to be more associated with fighting and driving-related problems, and regular marijuana use with arrests and money problems. These are problems associated with the illegal status of drug use and sales.

## Perceived Harm

Compared to alcohol (see Table 13), more respondents in all grades rated frequent use (daily or almost daily basis) of marijuana as *extremely harmful* (Table 24). However, there was a greater drop in perceived harm with age. Whereas the *extreme harm* rate

dropped only 10 points between grades 7 and 11 for alcohol, it dropped 30 points for marijuana, from 73% to 42%. Among 11th graders, the rate for marijuana was only 10 points lower than for alcohol.

Unfortunately, these results cannot be compared to those from the 1995 survey. Due to a clerical error in the 1995 survey, the word "marijuana" was replaced by "marijuana or other drugs," with cocaine listed as an example. Given the greater stigma associated with hard drugs, one would assume this would result in higher rates of perceived harm. Even excluding the 1995 data, however, there has been a relative long-term decline (since before 1995) in harm ratings for frequent marijuana use.

**TABLE 24**  
**Perceived Harm of Frequent Use**  
**of Marijuana (Daily or Almost Daily)**

	Grade		
	7th	9th	11th
	(%)	(%)	(%)
Extremely Harmful	73.2	48.7	41.9
Harmful	17.6	28.6	24.2
Somewhat Harmful <sup>a</sup>	5.0	13.5	15.4
Harmless <sup>b</sup>	4.2	11.8	14.6

<sup>a</sup>For 7th grade the middle category of the response scale was labeled "somewhat harmless" rather than "somewhat harmful" as for 9th and 11th. Percentages of frequent use for 7th grade were from Form A; for 9th and 11th grades, Form B.

<sup>b</sup>Derived by combining the percentage of respondents who selected "Mainly Harmless" and "Harmless."

## Perceived Availability

As found in previous surveys, awareness of drug availability increased markedly with age (Table 25). More than two-fifths of 7th graders (42%) said they were unaware of how difficult it was to obtain drugs. However, only 19% of 9th graders and 16% of 11th graders claimed to be similarly unaware. These older youth perceived that marijuana and other drugs were actually more readily available than alcohol.

- Almost two-thirds of 9th graders (64%) and 77% of 11th graders reported that marijuana and other drugs were either *very easy* or *fairly easy* to obtain, about the same as for alcohol (Table 14).
- For *very easy*, the drug rates exceeded the alcohol rates in grades 9 and 11, but not grade 7.

These rates are marginally below 1995 for both 9th and 11th grades, but not enough to establish a clear downward trend. The rates for each category have been stable since 1993.

**TABLE 25**  
**Perceived Difficulty in Obtaining Marijuana and Other Drugs**

Degree of Difficulty	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Very easy	14.9	10.7	39.7	37.6	54.4	54.9
Fairly easy	13.4	16.9	26.2	26.1	24.7	22.3
Fairly difficult	12.3	12.6	7.3	8.4	3.1	3.3
Very difficult	15.6	17.9	4.1	8.6	2.7	3.7
Don't know	43.8	41.8	22.7	19.3	15.1	15.7

### Where Students Get Drugs

Respondents were asked to identify where students obtain drugs from a list of seven options (Table 26). They could choose as many alternatives as applied. Older students had greater knowledge of drug sources than younger respondents. This is consistent with their higher use and perception that drugs are readily available.

- Half (50%) of the 7th graders indicated that they *did not know* where students obtained drugs, compared to only 24% of 11th graders. In all grades, the specific sources fell into three categories based on response frequency.
- *Friends, school (friends), and parties/social events* were, as in the past, the most frequently selected sources, although there were variations in the order of options between grades. About half of 11th graders cited each of these sources.

## DRUG USE

- About one-quarter (24%) in grade 9 and 27% in grade 11 cited *dealers*.
- Students cited *parents/siblings* and *other family members* least frequently.

Some fluctuation in response frequencies across these sources has occurred from year to year. The percentages responding to all options declined slightly since the last survey; some substantially [e.g., *school (friends)*]. Nevertheless, the overall pattern has remained the same.

**TABLE 26**  
**Perceptions of Where Most Student Drug Users Get Drugs**

Source	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Parents/siblings	11.5	8.8	16.0	15.8	17.3	14.2
Other family	7.0	6.8	12.0	10.3	15.3	12.6
School (friends)	22.3	24.5	48.4	41.9	56.0	47.0
Parties/social events	22.8	25.3	42.9	40.6	52.2	48.6
Friends <sup>a</sup>	27.1	23.6	47.6	41.3	58.2	52.3
Dealers <sup>b</sup>	13.3	12.2	28.5	23.8	35.3	27.3
Don't know	51.5	49.9	27.2	27.6	21.5	23.7

<sup>a</sup>Outside school or parties.

<sup>b</sup>In community.

### Involvement in Drug Sales

Table 27 reveals that a significant minority of students in grades 9 and 11 had sold drugs in the past year. This is consistent with the previously observed finding that friends are the major source for drugs. The results differ little from those for 1995 (or 1993), except for a marked decline in selling among 9th-grade drug users.

- 15% of 9th graders and 20% of 11th graders had sold drugs one or more times.
- Among drug users, the percentages rose to 25% and 35%, respectively.
- About half of the 11th-grade sellers had sold drugs three or more times (9% of total sample; 17% of users).

These findings on use availability illustrate that obtaining drugs is a common form of adolescent social interchange. While dealers obviously enter the picture one or more steps removed, friends and social events are the main providers. Drug use and distribution have, for many years, been integrated into adolescent culture. Much, if not virtually all, of this activity may be informal, in the sense of small-scale sharing with reimbursement among peers, rather than large-scale dealing as employees of criminal organizations. In this sense, drugs are self-maintaining rather than something imposed from the outside. Resistance to drug prevention and intervention efforts is more understandable in this light.

## DRUG USE

**TABLE 27**

**Involvement in Drug Sales, Past Year, Total Sample and Drug Users, Grades 9 and 11**

	Grade 9		Grade 11	
	1995-96	1997-98	1995-96	1997-98
Frequency	(%)	(%)	(%)	(%)
<b>Total Sample</b>				
Once or twice	9.7	8.8	10.2	10.3
Three or more times	6.4	5.8	10.3	9.4
Total	16.2	14.6	20.5	19.7
<b>Drug Users</b>				
Once or twice	21.3	13.5	18.2	17.3
Three or more times	15.2	11.0	19.6	17.3
Total	36.5	24.6	37.7	34.6

### *Use by Adults*

Respondents were asked how many adults they knew used marijuana, cocaine, or methamphetamines on a regular basis (about once a week). (Given how widespread regular alcohol drinking is among adults, it was not included in the question.) The response scale varied from none to all. The results appear in Table 28. Assuming that adult models (probably including older siblings) play some role in giving drug use an appearance of legitimacy among adolescents, the level of teenage familiarity with drug use among adults should give pause for reflection.

- Half of 9th graders (50%) and a majority of 11th graders (59%) reported that they knew one or more adults who used marijuana regularly.
- The percentages for cocaine and methamphetamines were less than half those for marijuana but were still substantial. About one-fifth of 9th graders and more than one-fifth of 11th graders reported that they knew at least one adult regular user of each drug.

**TABLE 28**

**Knowledge of Regular Drug Use by Adults, Grades 9 and 11**

	Grade 9		Grade 11	
	1995-96	1997-98	1995-96	1997-98
Substance	(%)	(%)	(%)	(%)
Marijuana/hashish	43.4	50.0	52.9	58.7
Cocaine or crack	21.4	19.4	24.2	22.2
Methamphetamines	20.2	21.2	24.4	25.1

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## DRUG USE

The percent of students knowing adult marijuana users increased markedly in both grades. Indeed, the current rates for both 9th and 11th graders approach the previous highs reported in 1985. The percentage knowing one or more adults who used cocaine declined marginally compared to 1995, but corresponding ratings for methamphetamines rose marginally. The result is that students may, for the first time, know more adults using methamphetamines than using cocaine. This finding is consistent with the changing patterns in adult use.



# 4

## Intensity of Involvement in Alcohol and Drug Use

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**Even attending school “high” once indicates a particularly strong affiliation with the drug-using peer culture and a high degree of estrangement from school. These youth show a level of drug involvement so pervasive that the potential repercussions for violating school rules are inconsequential to them.**

**T**he results reported so far have dealt with specific categories of substance use. This section focuses on the depth or “intensity” of involvement in AOD use in general, including measures of total abstinence and of heavy or risky use. While any AOD use implies risk, especially among children and adolescents, some behaviors and patterns represent more serious danger signs. Summarized here are polydrug use, attending school “high” on alcohol or other drugs, and two summary measures or indexes of substantial involvement with alcohol and/or drugs: high-risk use (HRU), which refers to drugs, and excessive alcohol use (EAU). Finally, respondents’ perceived need for AOD counseling or treatment is reported.

### *Abstinence*

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Table 29 provides rates for abstinence (no use) from any alcohol or other drug use in the respondents’ lifetime, the past six months, and the past 30 days. For all three indicators, a pronounced drop in abstinence occurs between grades 7 and 9.

- Forty-four percent of 7th graders, compared to only 21.5% of 9th graders and 17% of 11th graders, had been abstinent throughout their lifetime. In other words, more than half of 7th graders and more than three-quarters of 11th graders had at least tried alcohol or another drug, with the biggest increase in grade 9.
- Six-month rates were only moderately higher, at 47% of 7th graders, 29% of 9th graders, and 23% of 11th graders.
- Thirty-day abstinence rates were much higher, at about half of high school students and three-quarters of 7th graders.

Overall, these rates are consistent with those of 1995. In 7th grade they all increased, especially lifetime abstinence, which rose 3 points to equal the previous peak in 1989.

**TABLE 29**  
**Total Abstinence from Alcohol and Drugs in Lifetime,**  
**Past Six Months, and Past Month**

	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Lifetime	39.4	43.8	23.9	21.5	14.3	16.8
Past six months	44.8	47.1	19.6	29.0	22.9	23.1
Past 30 days	72.5	73.4	54.3	55.0	45.4	48.1

### *Use of Alcohol on Occasion of First Drug Use*

To assess the influence of alcohol use on drug use initiation, students were asked how many drinks of alcohol they had consumed on the occasion of their first drug use. Among young people, alcohol and the social environment that accompanies drinking facilitate experimentation with other drugs. Results in Table 30 show that half or more of respondents in each grade had at least one drink before having their first drug experience.

- Among 11th graders, the majority of respondents had more than one drink, and almost half of those had had three or more drinks.
- Compared to 1995, there was a substantial change in each grade but not in a consistent direction—rising in grades 7 and 11, and declining in grade 9.

For 11th graders the results on this measure have been relatively stable since it was first asked in 1989 (range 54% to 60% not shown in Table 30). However, in 7th grade, rates declined markedly between 1989 (79%) and 1995 (46.5%), before increasing in the 1997 survey.

**TABLE 30**  
**Number of Drinks Consumed Before First Drug Use, Alcohol Users Only<sup>a</sup>**

Amount Consumed	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Did not drink first	53.5	48.1	41.4	50.1	46.2	40.8
Had one drink	28.6	36.1	26.2	24.7	14.6	19.5
Had two drinks	8.0	7.6	11.7	8.5	12.7	14.2
Had three or more drinks	9.8	8.2	20.7	16.7	26.6	25.5
Total who drank first	46.5	51.9	58.6	49.9	53.8	59.2

<sup>a</sup>A drink was defined as "one regular size can/bottle of beer or wine cooler, one glass of wine, one mixed drink, or one short glass of liquor."

### *Polydrug Use (Past Six Months)*

As an indicator of AOD involvement, respondents were asked to indicate how often, in the previous six months, they had used two or more substances (e.g., beer and marijuana) on the same occasion (Table 31). Such polydrug use involves risk because potentially dangerous synergistic interactions between drugs can result.

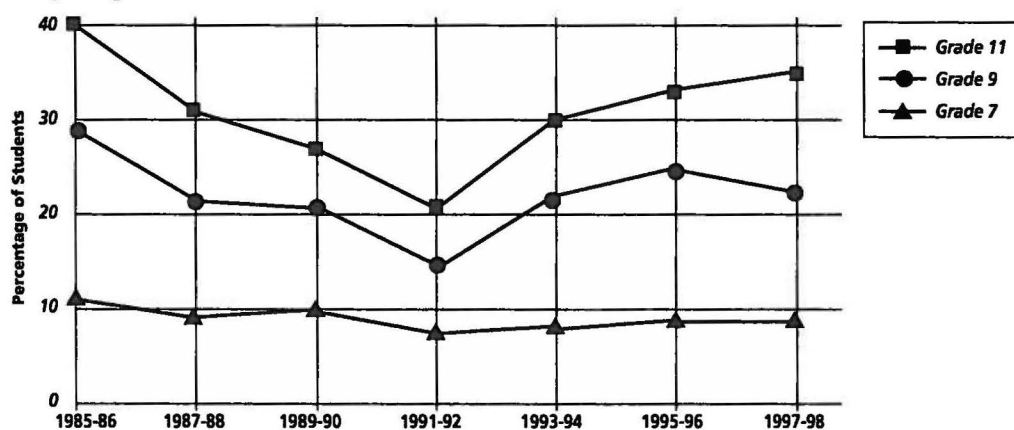
- Rates of polydrug use on at least one occasion rose from 8% of 7th graders to 23% of 9th graders and 34% of 11th graders.
- Depending on grade, half or more students reported polydrug use on only one or two occasions. However, 4% of 9th graders and 9% of 11th graders did so on seven or more occasions, conceivably more than once a month. For grade 11, this constituted almost one-quarter of polydrug users.

**TABLE 31**  
**Polydrug Use in Past Six Months**

Frequency	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
1-2 times	5.3	5.7	13.0	14.3	14.3	16.7
3-6 times	1.8	1.6	6.0	5.0	8.0	8.0
7 or more	0.9	0.9	5.7	4.1	9.9	8.9
Total	8.1	8.2	24.7	23.4	32.2	33.6

Figure 11 illustrates trends in polydrug use since 1985. Since 1993, this behavior has increased moderately among 11th graders (from 29% to 34%), but remained relatively stable for 7th- and 9th-grade students. These rates are virtually identical to those recorded in 1995. These trends have more or less paralleled those for marijuana use (see Figures 7 and 8), undoubtedly reflecting the popularity of marijuana among polydrug users.

**FIGURE 11**  
**Polydrug Use in the Past Six Months, Since 1985**



*“High” at School on Alcohol or Drugs*

Students were asked the frequency that they ever attended school “high” on alcohol or another drug. Even attending school “high” once indicates a particularly strong affiliation with the drug-using peer culture and a high degree of estrangement from school. These youth show a level of drug involvement so pervasive that the potential repercussions for violating school rules are inconsequential to them. This is behavior that also threatens school efforts to educate all youth. Table 32 shows that:

- Eight percent of 7th graders, 20% of 9th graders, and 31% of 11th graders had been high at school on one or more occasions during their lifetime.
- In 11th grade, the majority (58%) of these youth reported three or more instances, and 38% more than six times.

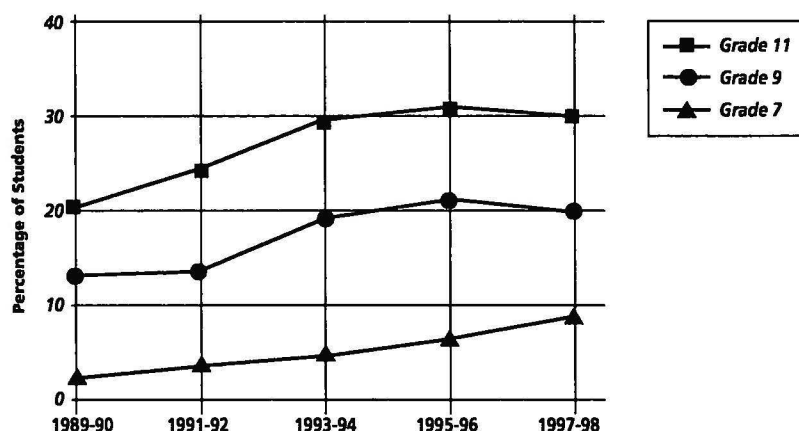
TABLE 32

**Ever (Lifetime) “High” at School on Alcohol or Another Drug**

Frequency	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Once or twice	6.6	5.6	12.1	12.5	13.3	13.4
3 to 6 times	0.6	1.3	4.9	2.5	5.1	6.0
7 or more times	0.3	1.4	6.3	4.9	13.8	12.0
Total	7.6	8.3	23.3	19.9	32.1	31.3

Figure 12 shows that, between 1989 and 1995, the high-at-school rate increased by about 5 points for 9th graders and 10 points for 11th graders. However, this trend appears to have peaked, with 1997 rates stable in grade 11 and even declining in grade 9. This trend parallels the stabilization of marijuana use.

FIGURE 12

**Ever “High” at School on Alcohol or Another Drug, Since 1989**

## *Excessive Alcohol and High-Risk Drug Use*

Early in the history of the survey a summary measure—the *High-Risk User* (HRU) index—was developed to identify the proportion of students in grades 9 and 11 who engaged in heavy, frequent, or potentially abusive drug use, as compared to “conventional users” and abstainers. The Excessive Alcohol User (EAU) index was developed in 1991 to identify respondents who used alcohol abusively (getting very drunk, sick, etc.). Specific criteria for classification as HRU or EAU are provided below. Table 33 provides the results for both of these measures, as well as a combined category of students who were classified as either EAU or HRU.

**TABLE 33**  
**High-Risk and Conventional Drug Use, Abstinence, and Excessive Alcohol Use**

	1995-96 (%)	1997-98 (%)
<b>Grade 9</b>		
High-Risk Drug Users (HRU) <sup>a</sup>	20.2	20.3
Conventional Users (CON) <sup>a</sup>	50.4	51.5
Abstainers (ABS) <sup>b</sup>	29.4	28.2
Excessive Alcohol Users (EAU)	23.3	19.4
Total EAU or HRU	28.5	29.5
<b>Grade 11</b>		
High-Risk Drug Users (HRU) <sup>a</sup>	26.8	26.9
Conventional Users (CON) <sup>a</sup>	50.6	50.4
Abstainers (ABS) <sup>b</sup>	22.6	22.7
Excessive Alcohol Users (EAU)	31.3	30.8
Total EAU or HRU	38.4	38.6

<sup>a</sup>Refers to drug use in the past six months only.

<sup>b</sup>Regarding abstinence rates, see note 17.

The HRU index is based on patterns of use that indicated a willingness to take risks in drug use or a pattern of regular use. A respondent was classified as HRU if he/she engaged in any of the following types of drug use during the past six months:

- using cocaine in any form, including crack;
- frequent (three or more times) polydrug use;
- weekly or more frequent use of marijuana; or
- a pattern of use involving frequent or multiple use of other drugs.<sup>1</sup>

*Conventional users* (CON), for lack of a better term, were classified as those respondents who had used either alcohol or a drug at least once in the previous six months but did not meet any of the four HRU criteria. Respondents who had not used alcohol or any drug in this period were classified as *abstainers*.

- **High-Risk Use.** In the current and previous survey, about one-fifth (20%) of 9th graders and more than one-quarter (27%) of 11th graders met the HRU criteria.
- **Conventional Use.** In both the 9th and 11th grades, about half of the respondents (50% to 51.5%) were conventional users, as was the case in 1993 and 1995. This group has invariably been the largest regardless of grade level.
- **Abstinence.** Twenty-eight percent of 9th graders and 23% of 11th graders were classified as abstainers. By the 11th grade, the number of high-risk users of alcohol and drugs exceeded the number of students who did not use drugs or alcohol in the six months preceding the survey.<sup>2</sup>

Table 33 also shows that 19% of 9th graders and 31% of 11th graders were identified as excessive alcohol users. Identification as an EAU was based on reporting any of the following three patterns of alcohol use:

- drank five drinks in a row two times in the past two weeks;
- was very drunk or sick three or more times in a lifetime; or
- likes to drink to get drunk or feel the effects a lot.

The combined percent of students classified as either HRU or EAU (one or both) registered 30% in 9th grade and 39% in 11th grade, similar to 1995. These groups obviously overlap extensively, since the percentages classified individually as HRU or EAU are only moderately lower than the total number of respondents who were in the combined category. For example, 27% of 11th graders were HRU, 31% were EAU, and 33.5% were one or the other.

### Trends

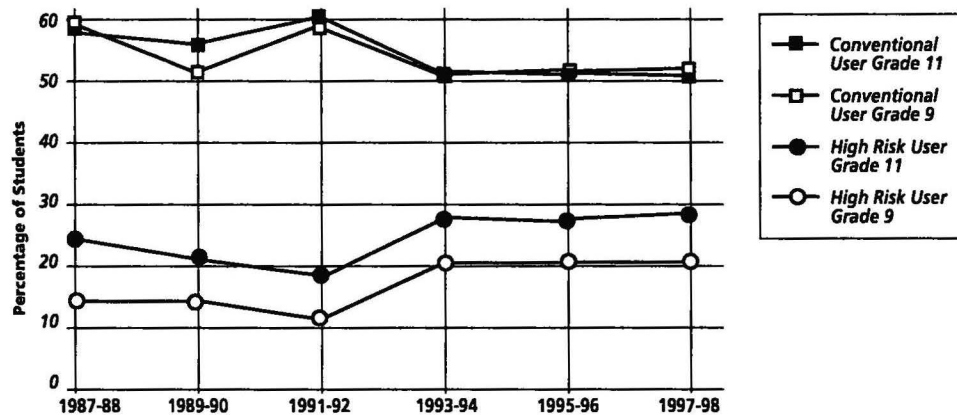
Figure 13 reveals little change since 1993 in the number of *high-risk* or *conventional* users. Not shown in the figure is the percentage of abstainers. In grade 9, abstention declined after the 1989 survey and has remained virtually constant since 1993. In grade 11, there has been no notable fluctuation in abstainers at any time. Greater fluctuations have occurred in the proportion of *conventional* and *high-risk* users, with an inverse relationship between behaviors. This suggests that it is easier to impact on the level of drug use than to prevent any use.

Figure 14 gives a visual picture of the EAU findings since this rate was first calculated in 1991.

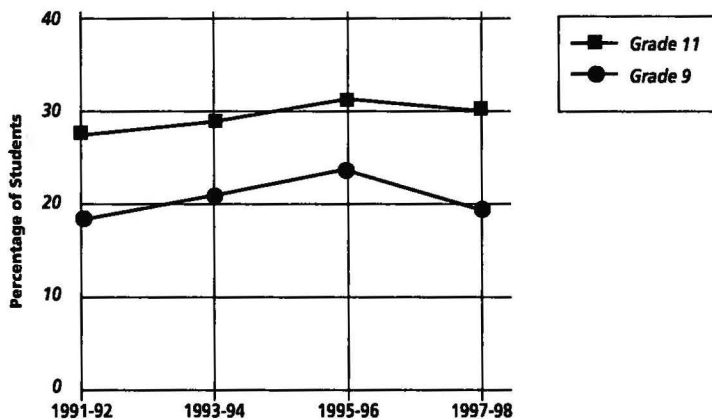
- In grade 9, the percentage of EAU students increased by 5 points between 1991 (18.5%) and 1995 (23%). There has been almost as sharp a drop of 4 points since the 1995 survey, returning the 9th-grade rate almost to the 1991 level.

- In grade 11, the EAU rate has been more consistent. A parallel increase of 3 points occurred between 1991 and 1995, but the rate has now leveled off.

**FIGURE 13**  
**High-Risk and Conventional Drug Use in the Past Six Months, Grades 9 and 11, Since 1987**



**FIGURE 14**  
**Excessive Alcohol Use, Grades 9 and 11, Since 1991**



## Need for Counseling or Treatment

Given this level of AOD involvement, what proportion of students felt, at some point, that they needed AOD counseling or treatment? As in the past, Table 34 shows that only very small numbers definitely answered yes. However, the percent that marked don't know may contain additional individuals who at least speculated that they might need help.

- Only about 2% of both the 9th and 11th graders, at some time, felt they needed AOD counseling or treatment.
- If the percent that responded *don't know* is added, 8% of upper graders may have at least considered the possibility of needing it, or 17% of users.

# INTENSITY OF INVOLVEMENT IN ALCOHOL AND DRUG USE

Even including the *don't knows*, these percentages are far below the rates for drug users attempting to stop use (see Table 22). Moreover, it is still apparent that 34% of 9th graders and 42% of 11th graders used alcohol or other drugs but felt no need for professional assistance.

**TABLE 34**  
**Perceived Need for Counseling or Treatment**

	Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
No, never used AOD	55.4	57.9	46.2	49.6
No, but do use AOD	32.6	34.1	43.7	41.9
Yes	2.1	1.5	2.9	2.0
Don't know	9.8	6.5	7.1	6.4

## ENDNOTES

- 1 The last HRU indicator identifies respondents who had (a) used three or more drugs (other than cocaine and marijuana) at least "once or twice," or (b) who had used one such drug at least a few times and one other drug at least once, etc. The rationale underlying the index is explained in Skager & Frith, 1989.
- 2 Abstinence rates here vary slightly from those in Table 22 because they are calculated only on the proportion who provided information on all items on which HRU status is calculated.



# 5

## Prevention *and* Intervention

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**Telling students not to drink or use drugs may be perceived as telling them not to have fun or have interesting or exciting experiences. This is not likely to be a compelling message for older teens.**

**T**his section covers findings relevant to AOD prevention and intervention efforts, including

- youth perceptions of reasons peers use drugs;
- sources of information about drugs;
- availability of, participation in, and perceived effects of school-based prevention and intervention programs; and
- awareness and use of school programs for helping students with AOD-related problems.

### *Reasons Students Use Alcohol or Drugs*

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Respondents were given a list of six reasons “kids their age” might use alcohol or drugs and were asked to identify all they felt were true (Table 35). As in the past, the most frequently endorsed response alternative overall (except 11th grade) was *because they want to know what it’s like* (curiosity). They also perceived to *have fun* and *friends use* as relatively important for all grades. However, with age the perceived role of friends declined and that of fun increased.

- *Curiosity* about drugs was the most frequently selected option in grades 7 (46%) and 9 (49%), and it rated second in grade 11 (51%).
- *Friends use* tied with curiosity as the most selected option among 7th graders (45%), but it was only the third most selected option among the upper grades.

- *Having fun*, in contrast, was next to last in importance among 7th graders (32%) but ranked second for 9th graders (47%) and first for 11th graders (62%). This was the widest range in percentages across grades.
- *Avoiding problems* was cited by 42% to 44% across grades, and 7th graders rated it about as important as *curiosity* and *friends use*.
- *Boredom* was the least frequently cited reason in all grades, marked by only 15% of 7th grade, 25% of 9th grade, and 30.5% of 11th-grade students.

Minor response fluctuations have occurred every year since the item was first used in 1985. Compared to 1995, rate differences across the five reasons were generally smaller, but the overall pattern has been consistent over time since 1985. Students have most frequently selected *having fun*, *curiosity*, and *friends use*.

**TABLE 35**  
**Reasons Kids Use Alcohol and Other Drugs**

Reason	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Avoid problems	42.3	44.0	45.1	43.5	47.7	41.8
See what it's like	46.9	45.6	54.2	49.2	57.6	50.9
Friends use	51.6	45.2	50.2	43.2	54.4	46.6
Have fun	33.5	31.8	52.7	46.9	62.0	62.0
Bored, nothing to do	17.4	14.6	25.8	24.7	31.4	30.5

However, the variations across grades have implications for prevention. As youth mature, *friends use* declines noticeably in ranking compared to *having fun* and *curiosity*, perhaps because respondent use has become more common. This raises questions about the efficacy of social influence and resistance skill approaches to prevention among older youth. The relatively high rank of *friends use* in 7th grade—along with the evidence that students overestimate peer use prevalence—suggests that normative education approaches would be more appropriate for younger students.

The high rate of endorsement of *having fun* among upper graders supports that AOD use for adolescents is a social, rather than solitary, enterprise. Telling students not to drink or use drugs may be perceived as telling them not to have fun or have interesting or exciting experiences. This is not likely to be a compelling message for older teens.

Finally, the results do not lend support to the frequently expressed view by adults that adolescents use drugs out of boredom. This is often the basis for supporting enhanced recreation services or "alternative activities." While there may be many good

reasons to provide youth with activities, this in itself may have only limited impact on drug use unless the activities are integrated into a comprehensive prevention approach.

## Information Sources

The CSS asks students to mark any of seven possible sources of information from which they might have learned about alcohol and other drugs. In Table 36, the sources most frequently endorsed overall were school and friends. However, there were important differences by grade across the information options.

- *School* was most important among 7th graders, cited by 62%. It declined somewhat with grade level, to 55.5% in grade 11.
- *Friends* were only moderately important in grade 7, cited by 38%. It increased substantially to 60% by grade 11.
- *Parents* were cited by fewer than half of the respondents regardless of grade level, and their role declined somewhat in importance with age, from 45% in grade 7 to 36% in grade 11.
- *Movies and TV* did not have the influence often assumed by adults. Only 31% to 37%, across grades, cited these media as sources of information.
- *Own experience* (i.e., the respondents') grew in relative importance across grade levels, cited by only 14% of 7th graders compared to 36.5% of 11th graders. This is not surprising given the increases in use that occur with age.

These results are consistent with those reported in 1995 and previously. As youth age they rely less and less on schools and parents for information on drugs and more on their own friends and their own experience. This is merely one example of an increased dependence on peers for information relating to social norms and behaviors.

**TABLE 36**  
**Sources of Information About Alcohol and Other Drugs**

Source	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
School	65.3	62.1	57.7	55.7	55.4	55.5
Friends	38.6	38.3	57.6	52.4	64.9	60.3
Parents	45.9	45.2	37.1	38.4	38.5	36.2
Movies/TV	37.9	37.0	35.9	31.4	39.3	33.0
Own experience	16.1	13.9	27.2	22.4	41.1	36.5
Siblings	16.1	15.5	17.0	14.8	18.4	17.4
Other	21.3	19.1	19.0	18.9	20.2	16.7

### Perceived Parent Attitudes

Parents have been criticized for not taking a firm stand against AOD use by their children.<sup>1</sup> Survey results suggest otherwise, although this was less true for alcohol than marijuana in the upper grades. For the first time, respondents were asked how they thought their parents or guardians would feel if they learned that the respondent used marijuana or alcohol. As reported in Table 37:

- **Marijuana Use.** Regardless of grade level, more than 8 out of 10 respondents felt that their parents would *disapprove strongly* if they were to learn that the respondent had used marijuana (95% of 7th graders, 88% of 9th graders, and 84% of 11th graders). The percent who felt that their parents *would not care much* did not achieve statistical significance in grades 7 and 9, and was only 4% in grade 11.

TABLE 37

#### Perceived Parental Disapproval if Respondent Used Marijuana or Alcohol

	7th (%)	Grade 9th (%)	11th (%)
<b>Marijuana</b>			
Disapprove strongly	94.6	88.4	84.4
Disapprove some	3.8	9.4	11.7
Would not care much	1.6	2.1	3.9
<b>Alcohol</b>			
Disapprove strongly	83.1	74.5	65.8
Disapprove some	13.3	18.7	27.5
Would not care much	3.6	6.8	6.7

- **Alcohol Use.** Fewer respondents, though still substantial majorities in all grades, believed their parents would disapprove strongly of their alcohol use (83% of 7th graders, 74.5% of 9th, and 66% of 11th). The drop in perceived parental disapproval with age was also more substantial than for marijuana.

Given that 33% of 9th graders had tried marijuana and 73% alcohol, even strong parental disapproval appears to be disregarded among youth that choose to use alcohol and marijuana. From this perspective, the decline in the role of parents as AOD information sources with age may reflect a shift away from a known

source of disapproval as more youth initiate use. The students' disregard may also be due in part to a perception that adults have a double standard because, as reported above, substantial numbers of students knew at least one adult who used marijuana regularly (see Table 28).

### Participation in School Prevention Efforts

Respondents identified the types of school AOD-prevention programs or activities in which they were involved during the previous 12 months, as well as what effects these activities may have had on their decisions about AOD use.

#### Prevention Exposure (Past Year)

Table 38 summarizes the results for self-reported participation in eight typical prevention strategies and activities. Arguably, most striking in the results is the decline

in prevention exposure with age and the high proportion of upper graders who reported not being involved in any prevention program or activity, or not knowing if they did. Moreover, supporting this, the rates for each specific activity declined with age, except for peer discussion.

- **No Involvement.** The percent who *denied any participation in a prevention program/activity* rose from 18% of 7th graders to fully one-third of 11th graders. Including those who were uncertain if they had participated (i.e., responded *don't know*), the nonexposure rates rose from 32% of 7th graders to 43% of 11th, making it the most selected option among seniors.
- **Classroom Instruction.** The most frequently reported activity in all grades was *receiving AOD information as part of a course*. However, the reported rate declined with grade, from 46% in 7th grade and 41.5% in 9th grade to 33% in 11th grade.
- **Assemblies.** *Attending assemblies about AOD use* ranked second, declining from about 30% in 7th grade to about 24% in 11th grade.
- **Guest Speakers.** *Listening to a guest speaker* ranked third among both 7th and 9th graders, reported by almost one in five students. It ranked fourth among 11th graders, selected by 14%.
- **Peer Discussions.** In contrast, the proportion of respondents who *talked to another student* about not using drugs increased with grade, from 10% in 7th grade to 15.5% in 11th grade.

TABLE 38  
Participation in School Prevention Activities and Programs in the Past Year

	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Received information on AOD in a course	42.6	46.0	33.9	41.5	33.0	32.7
Attended assemblies on AOD	30.5	30.3	31.0	24.7	30.2	24.1
Listened to a guest speaker	19.5	18.3	18.5	17.0	19.0	13.9
Talked with student about not using AOD	10.3	10.0	12.2	13.5	17.9	15.5
Attended AOD-free social event	9.6	8.3	6.9	4.9	7.9	5.6
Member student prevention organization	8.5	6.1	5.3	2.7	5.8	3.4
Participate in AOD essay or art contest	14.6	11.7	5.9	6.8	2.9	3.7
Signed no-use contract	11.4	10.7	6.6	8.1	8.2	9.0
Signed no drink/drive contract	7.7	6.2	3.3	4.1	7.1	4.4
Other prevention activity	9.1	11.2	9.0	7.5	6.4	6.9
No prevention involvement	21.3	17.6	27.2	27.0	32.2	32.9
Don't know	15.1	14.6	14.1	12.6	11.0	10.0

Students less frequently selected a *no-use contract* (11% in 7th grade and 9% in 11th grade or *participation in essay/art contests* (12% in 7th grade and 4% in 11th grade). Even fewer selected *attending a drug-free social event*, such as Saturday Night Live or graduation party (8% in 7th grade and about 5% and 6% in 9th and 11th grades).

Among older students, the increasing frequency of peer discussions about quitting is consistent with the previously reported data on the growth of peer influences. This finding also demonstrates that peer influences can be positive as well as negative. As such, interactive educational strategies involving youth can be mobilized to help prevent use.

Although changes in this item in 1995 limit direct comparisons to previous results, student experiences with specific prevention activities have remained relatively constant during the last 12 years, suggesting they reflect current program implementation. Information about AOD use in classes, assemblies, and guest speakers have been most often reported in all three grade levels. There were some differences between current and 1995 results. For example, a higher proportion of today's 7th and 9th graders received information on AOD in a class. In addition, there were fewer 7th graders (but not upper graders) who did not participate in a prevention activity in 1997 (21% in 1995 vs. 18% currently).

Current results support the conclusion reached in 1993 and 1995 that there was less exposure to school-based prevention activities compared to the late 1980s. This phenomenon may be a result of reductions in program funding and other uncertainties. In general, prevention programs, from the perspective of student reports of activities, seem to be stuck in familiar patterns.

### **Perceived Effects of Participation (Lifetime)**

When asked about how they were affected by what they had ever learned at school about alcohol or drugs, only 19% of 7th graders, dropping to 11.5% of 11th graders, said they never had any classes or programs (Table 39). The most frequently reported prevention lessons across all grades were (a) to avoid use, and (b) information about harm. The percentages perceiving positive benefits from prevention education again declined with grade, suggesting a weakening of influence, reduced exposure, or both. Moreover, the percent reporting that lessons had no effect increased with age, although it still remained relatively low.

- **No Exposure or Effect.** Only 4% of 7th graders indicated that none of the prevention activities had affected them or that they learned nothing from them. Even in 11th grade, the rate was only 14.5%.

## PREVENTION AND INTERVENTION

- **Harm.** Learning that AOD use is harmful overall appears to be the most common lesson. It was the third most frequently selected response among 7th graders (43%) and 9th graders (34%), and the most frequent among 11th graders (39%).
- **Use Avoidance.** Similar percentages selected learning to *avoid or reduce AOD use* in 7th and 9th grades as selected the harm option. In 11th grade, the rate dropped to 28% for alcohol and 26% for drugs.
- **Resistance to Peer Pressure.** Fewer students reported learning to resist pressure from friends to use AOD (only 29% of 7th graders, 22% of 9th graders, and 21% of 11th graders), although this is a widely recommended strategy.
- **Self-Determination.** About one-fourth of the respondents at each grade level indicated that they had already decided on their own not to use drugs or alcohol (20% to 26% across grades).
- **Increasing Use Appeal.** Less than 10% across grades indicated that prevention education had made them more interested in trying AOD, the so-called boomerang effect.
- **Treatment Assistance.** Help in seeking treatment was the teens' chosen option, by only 2%-5%.

Compared to the 1995 survey, there were some small shifts in the response rates, but not in any one direction. The current results are consistent with 1995 and other past surveys in that students most frequently reported traditional approaches emphasizing harm and avoidance of use.

**TABLE 39**  
**Perceived Effects of Alcohol and Drug Prevention Education (Lifetime)**

Prevention Effect	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Never had AOD education	15.6	18.6	10.6	13.0	19.9	11.5
Avoid/reduce alcohol use	47.8	46.6	32.6	34.4	29.0	28.1
Avoid/reduce other drug use	43.7	44.8	31.5	29.8	28.9	26.1
Learned harmful	40.3	43.2	35.7	34.1	39.0	38.8
Resist pressure to use	28.8	28.5	23.1	21.6	20.5	20.9
Helped deal with feelings	15.0	14.0	9.8	8.2	9.5	8.8
Helped me talk with parents	6.5	7.0	4.4	2.7	3.8	3.8
Helped seek treatment*	4.5	4.9	1.9	1.8	1.5	3.0
No effect, learned nothing	5.4	3.8	12.3	9.3	16.4	14.5
Decided on own not to use	23.3	25.7	23.1	19.8	24.8	22.4
Made more interested in trying	5.5	4.9	9.4	7.1	6.8	7.2

\*Or counseling.



## *School Intervention Efforts*

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The CSS added questions in 1995 designed to assess the efforts by high schools to help students who are already AOD users. The questions cover respondents' perceptions about the availability of interventions, what might happen at their school to students who had problems with alcohol or drugs, the likelihood that they could find help, and respondents' own use of school intervention resources.

Taken as a whole, the most significant finding is that the majority of high school respondents were not aware of any helping resources at their schools. This is consistent with the low number of students who indicated the *help seek treatment* option on the prevention-effects item (Table 39). These results are disappointing after a decade in which programs for "at-risk" students have received so much attention. They underscore the great need to link students with AOD problems and their families to intervention and counseling services.

### **Dealing with Student AOD Problems**

Table 40 reports student perceptions of what would happen at school to students experiencing problems with alcohol or drugs. Of particular interest was awareness of helping resources. Almost half either were unaware of help or believed no help was available. Three in 10 believed that expulsion would be the most likely school response. Far fewer respondents perceived supportive school policies. This was especially true in 11th grade, where the need is greatest.

- The alternative attracting the largest response was *don't know*, selected by more than one-third of respondents (35%) at both grade levels.
- An additional 11% in grade 9 and 14% in grade 11 believed that such students would receive *no help*.
- Students most selected *expulsion or transfer* (27% of 9th graders and 31% of 11th graders).
- Almost one-third of 9th graders (32%) but only 22% of 11th graders (22%) believed that students would get *help from an adult* at their school.
- If there were *self-help groups* at the schools, barely 10% of the respondents at both grade levels were aware of them.

Compared to 1995, there were few differences. Ninth graders were somewhat more likely to choose finding help from an adult or another student, but this difference did not hold for 11th graders. Slightly fewer 9th and 11th graders believed that such a student would be referred to an outside agency.



# PREVENTION AND INTERVENTION

TABLE 40

## Perceived School Response to Students With AOD Problems, Grades 9 and 11

School Response	Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Help from adult <sup>a</sup>	25.9	31.7	22.6	22.4
Get help from another student	13.9	18.8	15.6	15.2
Join self-help group at school	9.8	9.9	9.9	10.0
Be expelled or transferred	26.5	27.0	32.5	31.1
Sent to outside agency	16.5	14.5	17.2	14.1
Not receive help at school	12.5	11.1	14.5	13.6
Don't know	37.4	34.5	37.3	34.6

<sup>a</sup>Counselor or teacher

Students were also asked whether they had ever talked at school about stopping their own AOD use with (a) other students in peer counseling or tutoring programs; (b) adults such as teachers or counselors; or (c) anyone in a meeting or school support group. Consistent with the data presented above, Table 41 shows that receiving help for use cessation in a school program was rare. The overwhelming majority of students never used intervention resources or programs at their school. If they did talk to someone, it was more likely to be another student than an adult.

- Students most frequently cited *talking with another student* in some kind of peer counseling program, indicated by 14% of 9th graders and 11% of 11th graders.
- Less than 11% of the students in both grades cited the other intervention approaches (*talking with adult counselor or teacher and attending some kind of support group or program*).

TABLE 41

## Ever Talked with Others About Stopping Own AOD Use, Grades 9 and 11

Person Talked To	1995-96			1997-98		
	Yes (%)	No (%)	Don't know (%)	Yes (%)	No (%)	Don't know (%)
<b>Grade 9</b>						
Another student (peer)	15.1	73.1	11.8	13.8	72.9	13.3
Adult (counselor, teacher)	6.7	83.2	10.1	10.5	78.8	10.7
Meeting or support group	7.5	85.6	6.9	8.7	79.7	11.6
<b>Grade 11</b>						
Another student (peer)	16.5	76.5	7.0	10.9	81.1	8.0
Adult (counselor, teacher)	8.5	86.5	5.1	7.4	86.9	5.7
Meeting or support group	8.8	86.7	4.4	5.5	87.9	6.5

Compared to the 1995 survey, slightly fewer students in grade 9 reported talking to another student and more talked with an adult at school. Among 11th graders, there was a general decline in all categories.

While students most frequently selected *talking with peers* as an intervention activity, it may be that some respondents did not understand what was meant. The full question on peer counseling read, "Have you ever talked about stopping use with another student in a peer counseling or tutoring program at school?" That the conversation had to be part of a formal school program may have been missed by some respondents, enough to result in only a small increase from the percentage checking help from adults and participation in support groups.

### Chances of Finding Help at School

Table 42 reports high school respondents' opinions on the chances that a student who wanted to stop using alcohol or other drugs would find help at school.

- Only one-fifth of the respondents in grade 9 (20%), and 14% in grade 11, believed that a student who wanted to stop AOD use would be *very likely* to find help at their school. Less than half in either grade thought it was at least *fairly likely*.
- In contrast, 30% of 9th graders and 41% of 11th graders believed that the prospects for receiving help to be *not likely*, and about another fifth indicated that they were unaware of such services (selected *don't know*).

Compared to 1995, there were increases for both 9th and 11th graders in the percent selecting *very likely* to find help, and a corresponding decrease in the selection of *unlikely* to find help. There was also an increase in the number of students saying they *didn't know* the likelihood of finding help.

**TABLE 42**  
**Likelihood of Finding Help at School to Stop AOD Use, Grades 9 and 11**

Likelihood	Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Very likely	13.5	20.4	10.3	13.9
Fairly likely	26.3	27.0	26.7	25.0
Not likely	39.6	29.8	45.2	40.8
Don't know	20.6	22.8	17.9	20.3

It may be that users themselves are more aware of helping resources. However, weekly users were more likely than the total sample to believe that it was *unlikely* the

school would *not* provide any help. (The *not likely* option was selected by slightly less than 25% of weekly alcohol users and more in the case of weekly marijuana users.)

### Awareness of Cessation Programs

Finally, students were asked whether their school had any programs to help students stop using alcohol or other drugs. The findings in Table 43 are consistent with the information already presented on school-based intervention programs. Less than 25% of the respondents perceived that their school provided such programs.

- For both 9th and 11th grades, about three-fourths of the students reported either that there definitely were no programs to help students stop AOD use, or that they did not know of any.

In 11th grade (but not 9th grade), weekly marijuana and alcohol users were more likely than the total sample to be aware of cessation programs. Compared to 1995, generally a higher proportion of students reported being aware of such programs at school and a lower proportion responded *Don't know* (not shown in Table 43).

TABLE 43

**Awareness of School Programs to Help Stop AOD Use, Grades 9 and 11, Total Sample vs. Weekly Users and Alcohol Users**

	Total Sample		Weekly Marijuana Users		Weekly Alcohol Users	
	9th (%)	11th (%)	9th (%)	11th (%)	9th (%)	11th (%)
Awareness						
Yes	23.3	23.9	24.1	29.3	23.3	29.8
No	12.7	20.2	12.8	16.1	13.0	19.3
Don't know	63.9	55.9	63.1	54.5	63.7	50.9

### ENDNOTES

- 1 For example, Secretary of Health, Education, and Welfare Donna Shalala has implied that parents are responsible for upward trends in youth drug use. "How can we expect young people in this country to resist the lure of marijuana if the parent is transmitting messages that marijuana is OK?" she said. (*San Jose Mercury News*, August 22, 1998.)

# Tobacco Use *and* Prevention

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**The rate of total smoking among 9th graders has consistently equaled or approached that of 11th graders. In other words, the major onset in smoking occurs between 7th and 9th grade.**

**T**his section is devoted to tobacco use and its prevention. Data comparable to that presented on alcohol and drugs is provided on student cigarette smoking and smokeless tobacco use in the past month and lifetime, 12-year trends, cessation attempts, perceived harm and availability, and exposure to school prevention and intervention efforts.

## *Current and Lifetime Prevalence*

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### **Frequency of Current Smoking (Overall and Daily)**

As shown in Table 44, smoking rates dramatically rose between 7th and 9th grades and then leveled off. At least some cigarette smoking in the previous month was reported by 13% of 7th graders, with rates more than doubling to 29% of 9th and 11th graders.

Daily smoking was much less frequent and rose steadily with age. It increased by a factor of almost six between 7th grade (2%) and 11th grade (11%). The proportion of daily smokers among all smokers also increased with age. Among 7th graders, they constituted less than one-sixth of all smokers; among 9th graders, one-quarter; and among 11th graders, more than one-third. This underscores the importance of preventing early smoking experimentation.

TABLE 44

**Frequency of Cigarette Smoking, Past Month**

Frequency	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
A few times <sup>a</sup>	8.9	8.1	11.5	13.6	12.0	11.7
More than a few times <sup>b</sup>	4.1	3.4	8.4	8.1	7.0	6.7
Daily	2.0	2.0	8.4	7.2	11.6	11.0
Total any use	15.1	13.4	28.2	29.0	30.5	29.3

<sup>a</sup>"But not daily."<sup>b</sup>Response category "More than a few times but not daily" added in 1991-92.**Trends**

**Grades 9 and 11.** Figure 15 reveals that overall smoking rates have fluctuated considerably in the past, but appear to have stabilized since 1993. There was very little change in both overall and daily smoking rates in the past month since 1995, varying only 1 to 2 percentage points across grades. More than is the case with beer or marijuana, the rate of total smoking among 9th graders has consistently equaled or approached that of 11th graders. In other words, the major onset in smoking occurs between 7th and 9th grade. Daily smoking has been more stable.

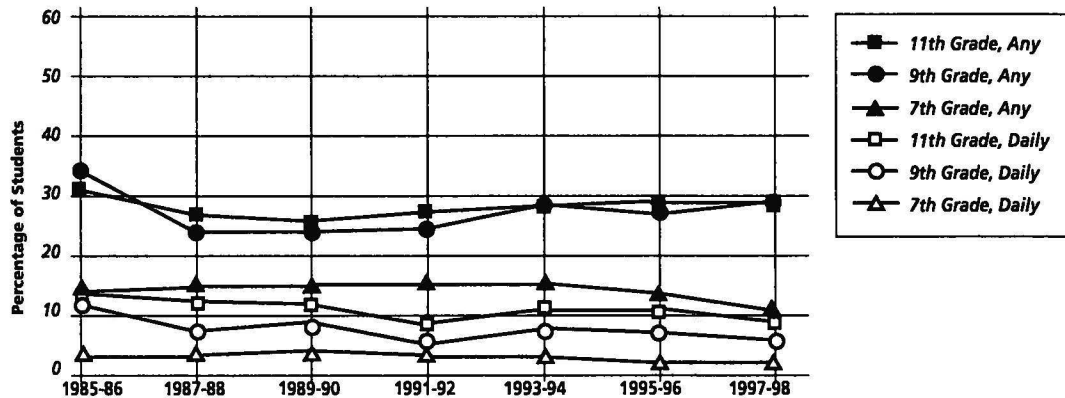
- **Any Smoking.** There was a marked decline in overall smoking prevalence from 1985 to 1989, and then a rise through 1993. Since then, rates have remained stable. These smoking trends parallel the U-shaped curve observed for marijuana.
- **Daily Smoking.** With the exception of a dip in 1991, daily smoking rates among 11th graders have varied by only about 3 percentage points since 1985 (from 11% to 14%), and have been flat since 1993. Ninth-grade rates have been more variable but basically follow the same trend.

**Grade 7.** Smoking in 7th grade has always shown less variation over time than in the upper grades. The current results suggest that both the prevalence and frequency of smoking may be declining in this grade.

- **Any Smoking.** Between 1985 and 1993, the overall smoking rate slowly rose from 16% to 18%. It declined almost 3 percentage points in 1993 and another 2 points in 1997. The current rate is the lowest rate ever reported (13%).
- **Daily Smoking.** Daily smoking has also slowly declined since 1989, from a peak of 5% (in 1989), to the current survey low of 2%, the same as in 1995.

Overall, the current results suggest that teen smoking has remained stable and may have even declined since 1993, especially among the youngest cohort. The main exception—the slight rise in overall smoking among 9th graders in 1995—was too small to be significant.

FIGURE 15

**Cigarette Smoking, Past Month, Since 1985****Current and Lifetime Smoking Compared to Alcohol and Marijuana Use**

In another item, respondents were asked whether they smoked at all (yes/no) in the past 30 days. Table 45 shows that the current smoking rates based on this item correspond reasonably closely to those in Table 44, although are somewhat lower. This slight difference is probably because the overall prevalence rates were calculated in Table 44 by adding frequency data rather than from simple yes/no responses.

Taken together, these two items indicate that about one-tenth of 7th graders, about one-fourth of 9th graders, and slightly more than one-fourth of 11th graders are current smokers. The biggest jump was a doubling of current smoking rates between grades 7 and 9.

Compared to data on current AOD use in Tables 4 and 15 (pages 22 and 38 respectively), current smoking was much less common in all grades than alcohol drinking. It was much more common than marijuana use among 7th and 9th graders, but equivalent to it in 11th grade. The smoking rate was about half that for drinking in grade 7 (22%) and slightly more than half in grade 11 (47%). In contrast it was about 1.5 times the marijuana rate in grade 7 (8%), only slightly higher in grade 9 (18%), and the same in grade 11 (26%).

TABLE 45

**Current and Lifetime Use of Cigarettes**

	Grade 7		Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
Frequency						
Past 30 days	11.2	10.8	23.3	23.0	28.4	26.8
Lifetime (even a puff)	30.5	25.5	50.6	52.2	60.1	56.4

### Lifetime Cigarette Smoking

Table 45 shows that about one-quarter of 7th graders had at least tried smoking sometime in their lives, even if only a puff or two. By the 9th grade, that rate increased to more than half the respondents. Lifetime smoking rates are more than two times higher than current rates in all three grades. This suggests a discontinuation rate of 50% among experimenters in the upper grades. Compared to 1995, there was a marked decrease among 7th and 11th graders (down 4 and 5 points, respectively), but little change in 9th grade.

Comparing lifetime alcohol and marijuana use rates (Tables 4 and 16 on pages 22 and 40), it appears that, as youth age, experimentation with cigarettes becomes relatively more common compared to alcohol, and less common compared to marijuana. The rate for lifetime smoking is about half that for alcohol in 7th grade (52%), but only 30% lower in grade 11 (81%). It is 2.3 times higher than for marijuana in grade 7 (11%), but only 1.2 times higher in grade 11 (46%) (see Table 16). These results are similar to those in 1995.

These lifetime rates include even youth who only smoked a puff or two. When asked to indicate the age at which they first smoked a whole cigarette, students reported only somewhat lower rates.

- By the modal age for their grade level, almost one-sixth of 7th graders (16.5%) had smoked a whole cigarette, rising to almost one-half of 11th graders (47%). This indicates that the great majority of experimenters in Table 46 (even a puff) had smoked a whole cigarette (65% of them in grade 7 to 84% in grade 11).
- Consistent with the past-month smoking trends in Figure 15, these rates are substantially lower than in 1995, particularly a 6.5 point drop among 7th graders.
- A substantial proportion of students who ever tried a whole cigarette reported current use—about 4 out of 10 in grades 7 and 9, and just less than half in grade 11.

### Smokeless Tobacco

Smokeless tobacco use is much less common than smoking. It was about one-third lower in 7th grade and about one-fifth lower in high school. However, this is behavior that has marked geographic variations, so that in many areas, particularly rural, the rate

**TABLE 46**  
**Ever Smoked a Whole Cigarette at Least Once,**  
**by Modal Age and Grade**

Grade and Age	1995-96 (%)	1997-98 (%)
7th graders by age 12	22.0	16.5
9th graders by age 14	41.9	38.7
11th graders by age 16	51.8	47.3

may be much higher. Among high school students, both 30-day and lifetime rates are lower than in 1995. This suggests possible inroads in reducing this practice among older adolescents.

- Current smokeless tobacco use was reported by only 3% of 7th graders, 4% of 9th graders, and 5% of 11th graders. These rates reflect a slight increase since 1995 among 7th graders and a decrease among 9th and 11th graders (Table 47).
- Lifetime rates were 7% in 7th grade, 10% in 9th grade, and 15% in 11th grade.

TABLE 47

**Current and Lifetime Use of Smokeless Tobacco**

	Grade 7		Grade 9		Grade 11	
	1995-96	1997-98	1995-96	1997-98	1995-96	1997-98
	(%)	(%)	(%)	(%)	(%)	(%)
Past 30 days	2.1	3.4	5.9	4.2	8.4	5.0
Lifetime	8.1	6.7	13.9	9.7	21.3	14.9

*Perceived Harm*

Findings on perceptions of harm from daily use of cigarettes are higher compared to the previous survey, but still lower than the first time this item was asked in 1993 (Table 48).

- Regular cigarette smoking was perceived as extremely harmful by 50% of 7th graders, 40.5% of 9th graders, and 43% of 11th graders.

As found previously, respondents in all grades reported harmful ratings for cigarettes that were higher than for alcohol, but generally lower than for marijuana. In 11th grade, the rates for extremely harmful were almost equivalent to marijuana (42%), but the harmless rate for smoking was less than one-third (14% for marijuana).

TABLE 48

**Perceived Harm of Frequent (Daily) Cigarette Smoking<sup>a</sup>**

	Grade 7		Grade 9		Grade 11	
	1995	1997	1995	1997	1995	1997
	(%)	(%)	(%)	(%)	(%)	(%)
Harmfulness ratings						
Extremely Harmful	42.5	49.9	32.4	40.5	41.6	43.4
Harmless <sup>b</sup>	5.6	4.4	7.7	5.3	4.6	3.7

<sup>a</sup>Frequent means "Daily or Almost Daily."

<sup>b</sup>Derived by combining the percentage of respondents who selected the "Mainly harmless" and "Harmless."



## Cessation Efforts

A majority of all smokers in high school indicated they made some effort to stop smoking—51% in grade 9 and 52% in grade 11. Of these, 9% and 6%, respectively, were not sure how many attempts were made. Almost one-half of 11th-grade smokers and more than two-fifths of 9th-grade smokers had tried to stop at least once (Table 49). This is a higher proportion of users trying to quit than for drugs or, especially, for alcohol (see Tables 10 and 22).

- Of smokers, 43% in 9th grade and 46% in 11th grade made some cessation attempt.
- Just under half of these (39-44%) tried to stop more than once.

TABLE 49

### Attempts to Stop Cigarette Smoking, Grades 9 and 11, Users Only

Frequency	Grade 9		Grade 11	
	1995-96 (%)	1997-98 (%)	1995-96 (%)	1997-98 (%)
None	47.4	48.8	48.3	47.6
Total	42.7	42.6	46.5	45.6
Once	23.5	25.8	26.2	25.5
Two or three times	13.5	10.9	15.1	14.5
Four or more times	5.7	5.9	5.2	5.6
Don't know	9.9	8.7	5.2	6.8

These overall cessation rates in all grades are little changed from those of 1995, but are about 3 percentage points lower than in 1993. Compared to alcohol (see Table 10), the cessation-attempt rate for smoking was more than twice as high in 9th grade and 2.6 times higher in 11th grade. It is a common observation in the folk wisdom among recovering alcoholics that it is more difficult to stop smoking than to stop drinking or using drugs. The last point is consistent with this principle.

# Conclusions and Implications

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**The powerful influences that support experimentation and use of alcohol and drugs within both youth and adult cultures must be recognized and addressed in more sophisticated ways. Only a full understanding of these influences and the way they operate will cause society to reassess its notion that merely telling youth that using alcohol and drugs is wrong and dangerous to health and well-being will have any significant effect on use.**

**T**his 1997 survey marks the 12th year in which substance use among California secondary school students has been monitored. The findings reported here are important because they raise fundamental questions about the effectiveness of policies and strategies directed at reducing and even eliminating youth substance use.

Compared to the sixth biennial CSS in 1995–96, the current findings indicate little change in ATOD use in any grade. Moreover, the changes that did occur were mostly in the direction of declines, especially for alcohol and cigarette use among 7th graders. The results suggest that the general rise in ATOD use, particularly in marijuana, that characterized the first half of the 1990s has leveled off and may even be reversing among younger students.

Not only is use leveling off in California, but trends are more positive relative to the nation. The annual Monitoring the Future (MTF) Survey, funded by the National Institute on Drug Abuse, is the most valuable dataset for comparison to the CSS. The MTF differs in several respects from the CSS: it collects data from different grades (8, 10, and 12); assesses use in the past 12 months rather than past six months; and is administered in the spring. Nevertheless, trend comparisons are reasonable.

## CONCLUSIONS AND IMPLICATIONS

Appendix A provides a comparison of prevalence rates since 1991 between the two surveys. The comparison of trends suggests that, as a whole, prevalence rates for alcohol, marijuana, and cigarette use have remained more stable in California than nationally. Furthermore, the most recent results suggest use of marijuana and cigarettes in California are both declining relative to national trends. Alcohol use trends appear very similar.

- **Alcohol.** While mean MTF rates (since 1991) have been similar to those of CSS, they indicate more variability (especially for 8th and 10th grades), with higher rates from 1991 to 1993, declining thereafter.
- **Marijuana.** CSS rates of marijuana use had been higher than those of MTF, but since 1995 they have been lower for 7th/8th grades and in 1997 they were about the same for high school.
- **Cigarettes (Past 30 Days).** CSS rates of cigarette use present a mixed picture. Some CSS rates are lower, higher, or similar to MTF for a given year. Until 1995, CSS rates were higher for 7th/8th grades and 9th/10th grades and about the same for 11th/12th grades. Most recent rates have been lower (for grades 7th/8th and 7th/8th) or the same (grades 9th/10th).

While this is encouraging, adolescent ATOD use remains as common today as in 1985 when this survey was initiated. The overall rates of alcohol and other drug use registered in this survey were remarkably close to those recorded in 1985, the year the survey was initiated. Then and now:

- The use of a drug more than the six months prior to the survey was reported by approximately one-quarter of 7th graders, more than two-fifths of 9th graders, and half of 11th graders.
- One-half of 7th graders, two-thirds of 9th graders, and three-quarters of 11th graders drank alcohol.

The sense of déjà vu emanating from the current findings inevitably raises questions about policy and practice in prevention.

The return to the baseline occurred after an intervening period in which the use of most drugs declined and then rose. Even the sustained decline in the use of cocaine is partially compensated for by the increasing use of methamphetamines, another stimulant drug. Dips in alcohol use were less pronounced and even more transient. Alcohol and drug use by teenagers remain widespread and common.

The numbers of heavy and high-risk drug users have also increased to an alarming level: a given 11th grader is actually more likely to be a High-Risk User than an abstainer

of alcohol or drugs. It is eminently clear that our society has not as yet been able to find or implement strategies that "inoculate" children against experimenting with substances later on in their teens.

### *Implications for Prevention Education*

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A question was posed in the summary of the 1995 survey: "Why has alcohol and drug use among youth been so resistant to the prevention programs offered by our schools and communities?" This question is as apt today as it was two years ago. Several findings from the current survey may help answer this question. At the very least, they point to a need to reassess current prevention and intervention strategies and reveal barriers that prevention efforts must overcome.

Alcohol and drug use have, for a long time, been an integral part of the culture into which contemporary youth are socialized.<sup>1</sup> Substance use among youth is quintessentially a social phenomenon. It is supported by personal and social experiences that contradict much of the information that is the current mainstay of school-based prevention. The following findings from the current survey support this assertion:

- **Use by Adults.** Almost 6 in 10 (59%) respondents in grade 11 knew at least one adult who used marijuana once a week or more often. In prevention programs, students are told that such an adult has a drug problem. But, what if the young person likes or admires that adult and thinks that he or she is living a desirable lifestyle? Would this not undermine the abstinence message and prevention in general?
- **What is "Normal?"** Direct personal experience with a drug is common among older teenagers. A majority (53%) of the 11th graders had tried a drug (primarily marijuana) at least once. Forty-two percent had used marijuana in the last six months and 1 in 4 (26%) in the last month. By high school students own estimates, the majority of their peers have tried marijuana.
- **How Youth Learn About Drugs.** More than 6 out of 10 (62%) 7th graders learned *a lot of what they know* about alcohol and other drugs from school classes and programs, while only a little more than one-third (38%) learned from friends. In contrast, 6 out of 10 (60%) 11th graders learned about alcohol and other drugs from friends. While more than half (56%) of the latter still indicated that they had learned about substances in school, more than one-third (37%) reported that they had learned about drugs through their own experiences.

## CONCLUSIONS AND IMPLICATIONS

- **How Hard to Obtain Drugs?** Youth tell us that drugs are easy to get, as easy as alcohol. Almost 8 out of 10 (77%) 16-year-olds reported that marijuana or other drugs were either *very easy* or *fairly easy* for students at their own grade level to obtain. Older respondents inform us that students get drugs from their friends, rather than from people they viewed as *dealers*. The distribution system may be perceived as a social network of peers rather than a network of criminals. Isn't it likely that easy availability and distribution by peers increases the perception that the use of illicit substances is acceptable, even *cool*?
- **Reasons for Use.** Six out of 10 (62%) 11th graders believed that their peers used alcohol and other drugs *to have fun* and more than half (51%) cited *to see what it's like*. Almost half of the respondents (47%) marked *because their friends use* as an important reason students used substances. Rightly or wrongly, the majority of students only one year away from high school graduation viewed drug use as a form of recreation, as a way of satisfying curiosity, and as a socially-sanctioned behavior, at least within their own reference group.

These results describe a climate of acceptance and tolerance of experimentation or moderate use among the majority of high school students.

- The frequency of lifetime use of one or more drugs underscores the importance of normative perceptions that students are likely to have as to the acceptability of drug use among their peers, especially older peers. Trying a drug, if only once or a few times, has become "ordinary" in a purely statistical sense.
- What are these young people saying to each other about their AOD-related experiences? Could their own experiences or that of friends contradict what they have been told about the dangers of use, including likelihood of addiction or arrest? If so, communication among peers is likely to cancel out anti-drug messages coming from adults.
- Moreover, although they perceived their parents strongly disapproved of marijuana use, they also perceived it as commonly used among adults and as readily available as alcohol.

Given these findings, we should perhaps not be surprised that with the rise of marijuana use in the 1990s came a reduction in perceived harm. Similar results again have been found nationally in the Monitoring the Future survey. Trends were also compared in harm or risk ratings since 1990. For marijuana, the percent of 11th graders (CSS) and 12th graders (MTF) rating frequent use as extremely harmful (CSS) or involving great risk (MTF) have both shown a steady and parallel downward trend since 1990,

during the same period that both surveys showed increased use. In contrast, in recent years, perceptions that frequent use of alcohol and cigarettes is harmful/risky have increased slightly. The “softening” of marijuana perceptions might indicate the “normalcy” of marijuana use.

These results illustrate the complex situation that prevention programs must address and why no single strategy by itself has been effective. As the California Department of Education has emphasized in its *Getting Results* guidebook to prevention, school, families, and communities must work together to address this continuing problems from multiple levels. The social climate that supports drug use among youth surely applies even more forcefully to alcohol. Contributions of advertising, promotion, and open consumption by adults and peers provide massive support for drinking. No wonder fewer than 1 in 5 of 16-year-olds have remained abstinent on a lifetime basis from both alcohol and drugs.

Prevention strategies, as well as all other approaches to reducing alcohol and drug use by youth, should be reassessed in light of the findings of this survey and of published scientific research on the effectiveness of current approaches to prevention. The powerful influences that support experimentation and use of alcohol and drugs within both youth and adult cultures must be recognized and addressed in more sophisticated ways. Only a full understanding of these influences and the way they operate will cause society to reassess its notion that merely telling youth that using alcohol and drugs is wrong and dangerous to health and well-being will have any significant effect on use.

### *Implications for Intervention Programs*

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One of the primary recommendations in the 1993 CSS was the need to expand school intervention programs.<sup>2</sup> Four years later, nothing has changed. This 1997 survey, once again, has found that relatively high percentages of students still in school—close to one-third by grade 11—were classified as excessive users of alcohol, high-risk drug users, or both. With three-quarters of these students reporting use of alcohol in the previous six months and more than 4 in 10 marijuana, it is hardly surprising that so many were high-risk or excessive users. These findings do not even take into account the many young people on the streets who were squeezed out of school or who simply disappeared from the enrollment rosters due, in large or small part, to their destructive involvement with alcohol and drugs.

## CONCLUSIONS AND IMPLICATIONS

Not all these students will become alcoholics or other addicts. But some of them are in trouble now. Among 11th graders, 20% reported one or more problems related to drug use and 28% related to alcohol. Problem rates were much higher among weekly users with 64% of weekly alcohol users and 58% of weekly marijuana users experiencing at least one problem related to their substance use. Many students have placed themselves at risk for school problems and physical harm because of their substance use.

- **Attending School "High."** The proportion of upper graders who attended school at least once while "high" on alcohol or another drug increased substantially since 1989, now accounting for 20% of 9th graders and 31% of 11th graders.
- **Perceived Harm to School Work.** Twenty-five percent of weekly marijuana users in grade 11 reported that their school work had been hurt as a result. Eighteen percent of weekly drinkers said the same.
- **Drinking-Driving Involvement.** Almost 4 in 10 of 11th-grade respondents had been at risk for drinking and driving, either by themselves or a friend.

The survey suggests that possibly as many as 4 in 10 drug users had made one or more attempts to stop, but also that little is provided to support their efforts at school, at least from student perceptions.

- Only 10% of students reported that there were support groups at their school for students in trouble with alcohol and drugs.
- Only about 1 in 5 students in grade 11 believed that a peer with an alcohol or drug problem would get help from an adult at their school. Most felt they would be expelled.

These findings speak for themselves. Society is not doing the job that the reality of the problem demands. Yet, there are student assistance models for school-based intervention programs that are effective and potential links between school and community agencies that can provide treatment services on a referral basis. These kinds of programs occupy a space between primary prevention and treatment. They include support groups for young children in alcohol and drug-abusing families and incorporate identification and referral strategies that parallel employee-assistance programs in the workplace.

The availability of alcohol-, drug-, and tobacco-intervention programs in secondary schools could go far to change the climate of acceptance of substance use by peers that undoubtedly exists in contemporary schools. Some time ago corporations and the military learned that dependence on punitive strategies for dealing with substance use served only to cover up the problem. If society can learn to provide helping resources in institutions enrolling adults, surely we can also learn to do so in schools that serve young people.

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## ENDNOTES

- 1 Skager, R. (1997). Why doesn't prevention prevent? *Prevention File*, Winter, p. 14-17.
- 2 Austin & Skager, 1996.



# APPENDIX A. SUPPLEMENTARY TREND TABLES

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## APPENDIX A. SUPPLEMENTARY TREND TABLES

### I. PREVALENCE AND LEVEL OF USE

**TABLE 1.**  
**Substance Use, Past Six Months, Grade 7**

	1985-86 (%)	1987-88 (%)	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Substance</b>							
Alcohol (Any)	—	—	50.0	53.2	53.1	50.3	47.2
Beer	41.1	40.3	36.1	41.1	39.4	37.1	35.0
Wine	40.1	38.2	39.7	41.1	41.8	40.3	36.4
Wine coolers	—	—	—	35.3	33.6	—	—
Spirits	20.8	18.4	15.8	19.5	22.0	19.9	19.0
Marijuana	9.7	5.8	6.8	7.7	11.1	10.9	11.2
Hashish	1.7	1.0	1.0	0.9	1.5	0.8	1.0
Amphetamines <sup>a</sup>	2.2	1.3	2.2	2.0	2.9	2.5	2.6
Cocaine	2.8	1.8	2.1	2.9	2.8	1.8	3.1
Inhalants	17.6	12.6	10.5	12.5	16.5	15.6	18.3
LSD	1.4	0.8	1.3	1.5	2.5	2.2	1.8
Psychedelics <sup>b</sup>	1.2	0.7	1.1	1.0	1.1	1.0	1.2
Barbiturates	1.2	0.8	0.8	1.3	1.4	0.8	0.9
Sedatives	1.0	0.9	1.0	1.1	1.1	0.4	0.5
Tranquilizers	2.7	2.5	2.5	2.6	2.4	2.0	2.6
PCP	1.5	1.7	2.3	2.5	3.5	3.5	3.6
Heroin	1.1	1.3	1.0	1.5	1.8	1.6	1.5
Other narcotics	1.9	1.3	2.6	2.5	2.9	3.1	2.2
<b>Aggregated Categories</b>							
Any AOD use	—	—	—	55.7	56.4	55.5	52.9
Alcohol only	—	—	—	35.6	31.9	29.3	25.7
Any illicit drug	—	—	18.9	20.2	24.6	26.2	27.2
Drug not marijuana <sup>c</sup>	—	—	17.3	17.0	20.5	21.0	22.8
Polydrug use <sup>d</sup>	10.8	8.8	10.2	6.4	7.4	8.1	8.2
No AOD use	—	—	46.6	44.3	43.6	44.5	47.1
<b>Weekly Use<sup>e</sup></b>							
Alcohol (Any)	—	2.1	3.2	4.4	3.7	3.4	3.6
Beer	2.4	1.6	2.1	2.6	2.7	2.3	2.5
Wine	—	—	1.6	2.4	1.5	1.1	1.5
Spirits	1.2	0.9	0.9	1.4	1.1	1.0	0.9
Marijuana	0.9	0.6	0.9	0.9	2.0	1.9	2.1

<sup>a</sup>Includes methamphetamines.

<sup>b</sup>Other than LSD.

<sup>c</sup>Any illicit drug other than marijuana.

<sup>d</sup>Use of two or more substances (e.g., alcohol and marijuana; cocaine and heroin) at the same time.

<sup>e</sup>Once a week or more often.

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### I. PREVALENCE AND LEVEL OF USE

**TABLE 2.**  
**Substance Use, Past Six Months, Grade 9**

	1985-86 (%)	1987-88 (%)	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Substance</b>							
Alcohol	—	—	61.8	67.4	68.6	67.2	67.3
Beer	61.0	57.7	48.6	55.0	57.2	54.0	54.4
Wine	56.1	52.4	51.8	55.0	57.6	54.8	56.1
Wine coolers	—	—	—	48.8	50.5	—	—
Spirits	43.7	38.9	34.5	37.8	44.6	41.7	42.2
Marijuana	32.2	21.6	19.6	19.4	30.4	34.2	32.5
Hashish	9.8	3.1	3.3	3.2	5.2	5.3	3.9
Amphetamines <sup>a</sup>	10.5	3.9	5.1	3.3	7.5	10.8	8.0
Cocaine	9.7	5.3	5.0	3.6	6.1	6.4	5.7
Inhalants	16.3	13.2	11.0	11.8	21.5	21.9	21.1
LSD	4.1	3.1	2.9	3.8	8.6	9.9	5.9
Psychedelics <sup>b</sup>	2.0	0.9	0.8	1.2	3.1	3.7	2.9
Barbiturates	4.3	1.9	1.3	1.3	2.3	1.2	1.0
Sedatives	3.9	1.9	1.5	1.9	2.5	2.2	1.8
Tranquilizers	7.2	5.4	3.8	3.7	6.3	6.7	4.3
PCP	3.1	2.6	4.0	3.0	5.4	6.1	5.5
Heroin	1.1	0.9	1.3	1.0	2.4	2.9	1.9
Other narcotics	5.8	4.9	3.7	4.2	6.6	7.6	4.5
<b>Aggregated Categories</b>							
Any AOD use	—	—	—	70.2	71.3	70.4	71.0
Alcohol only	—	—	—	29.3	29.8	27.3	27.6
Any illicit drug	—	—	27.0	40.9	41.6	43.1	43.4
Drug not marijuana <sup>c</sup>	—	—	20.5	20.1	30.1	31.7	30.1
Polydrug use <sup>d</sup>	29.0	21.2	20.7	14.1	22.2	24.7	23.4
No AOD use	—	—	35.5	29.8	28.7	29.6	29.0
<b>Weekly Use<sup>e</sup></b>							
Alcohol (Any)	—	—	11.1	11.7	14.3	10.8	9.4
Beer	11.9	8.5	7.8	8.8	10.2	8.8	6.8
Wine	—	—	6.1	4.3	5.5	3.4	3.4
Spirits	7.0	4.4	3.4	5.1	6.7	4.8	4.2
Marijuana	9.3	4.3	4.5	5.2	9.9	12.3	9.3

<sup>a</sup>Includes methamphetamines.

<sup>b</sup>Other than LSD.

<sup>c</sup>Any illicit drug other than marijuana.

<sup>d</sup>Use of two or more substances (e.g., alcohol and marijuana; cocaine and heroin) at the same time.

<sup>e</sup>Once a week or more often.

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### I. PREVALENCE AND LEVEL OF USE

**TABLE 3.**  
**Substance Use, Past Six Months, Grade 11**

	1985-86 (%)	1987-88 (%)	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Substance</b>							
Alcohol	—	—	74.8	76.5	74.3	75.3	74.8
Beer	69.2	68.3	61.9	66.2	63.3	64.1	63.5
Wine	62.0	59.1	60.5	62.0	60.3	60.7	58.6
Wine coolers	—	—	—	58.5	53.0	—	—
Spirits	53.1	52.4	45.6	50.7	51.7	54.6	54.0
Marijuana	42.1	32.8	27.6	29.4	40.0	42.8	41.6
Hashish	13.1	7.6	5.4	5.7	8.4	8.7	7.9
Amphetamines <sup>a</sup>	15.3	10.6	8.4	6.8	10.1	10.4	12.0
Cocaine	17.6	11.2	7.4	6.6	4.9	7.2	7.9
Inhalants	13.8	10.2	8.8	10.3	13.1	14.7	14.8
LSD	6.0	6.4	5.9	8.1	12.2	10.8	9.8
Psychedelics <sup>b</sup>	2.5	1.4	1.2	2.4	4.3	6.2	7.0
Barbiturates	4.0	2.2	2.9	2.1	1.7	1.5	1.6
Sedatives	5.4	3.2	2.7	2.6	3.3	2.1	3.1
Tranquilizers	8.1	5.9	6.6	5.6	7.0	5.3	5.8
PCP	3.1	3.1	3.2	3.3	3.7	4.1	4.6
Heroin	1.2	0.9	1.0	1.3	1.4	2.2	1.7
Other narcotics	9.4	7.5	7.1	6.0	7.8	7.7	7.2
<b>Aggregated Categories</b>							
Any AOD use	—	—	—	78.2	76.8	77.1	76.9
Alcohol only	—	—	—	40.7	30.3	27.8	28.3
Any illicit drug	—	—	35.6	37.7	46.5	49.4	48.7
Drug not marijuana <sup>c</sup>	—	—	24.0	23.2	28.5	28.0	30.5
Polydrug use <sup>d</sup>	39.3	30.5	26.7	21.0	29.3	32.2	33.6
No AOD use	—	—	23.2	21.8	23.2	22.9	23.1
<b>Weekly Use<sup>e</sup></b>							
Alcohol (Any)	—	—	19.5	20.4	20.6	19.8	20.0
Beer	20.1	19.5	16.1	17.4	17.2	17.2	16.7
Wine	—	—	7.5	6.8	6.5	5.2	5.4
Spirits	9.6	7.8	5.8	7.4	8.6	9.4	9.4
Marijuana	13.4	8.5	6.9	8.3	14.5	16.5	14.1

<sup>a</sup>Includes methamphetamines.

<sup>b</sup>Other than LSD.

<sup>c</sup>Any illicit drug other than marijuana.

<sup>d</sup>Use of two or more substances (e.g., alcohol and marijuana; cocaine and heroin) at the same time.

<sup>e</sup>Once a week or more often.

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### I. PREVALENCE AND LEVEL OF USE

**TABLE 4.**  
**Frequency of Current (Past Month) Cigarette Use**

	1985-86 (%)	1987-88 (%)	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Grade 7</b>							
<b>Frequency</b>							
A few times <sup>a</sup>	11.7	13.0	11.2	13.1	10.2	8.9	8.1
More than a few times <sup>b</sup>	—	—	—	3.3	3.7	4.1	3.
Daily	3.8	3.3	5.1	4.4	3.7	2.0	2.0
Total any use	15.5	16.3	16.3	17.5	17.7	15.1	13.4
<b>Grade 9</b>							
<b>Frequency</b>							
A few times <sup>a</sup>	20.6	16.7	13.7	19.6	14.8	11.5	13.6
More than a few times <sup>b</sup>	—	—	—	5.4	6.8	8.4	8.1
Daily	13.0	7.4	9.3	6.3	8.6	8.4	7.2
Total any use	33.6	24.1	23.0	25.9	30.2	28.2	29.0
<b>Grade 11</b>							
<b>Frequency</b>							
A few times <sup>a</sup>	16.5	14.1	11.3	18.8	12.1	12.0	11.7
More than a few times <sup>b</sup>	—	—	—	5.3	4.7	7.0	6.7
Daily	14.3	12.6	12.5	9.7	12.3	11.6	11.0
Total any use	30.8	26.7	23.7	28.5	29.1	30.5	29.3

<sup>a</sup>"But not daily."

<sup>b</sup>Response category "More than a few times but not daily" added in 1991.

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### I. PREVALENCE AND LEVEL OF USE

**TABLE 5.**

**Current (Last 30 Days) Use of Alcohol & Other Drugs, by Grade**

	Grade 7			Grade 9			Grade 11		
	1993-94 (%)	1995-96 (%)	1997-98 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Drug</b>									
Alcohol	27.8	23.2	21.7	43.5	39.2	37.5	50.1	47.7	46.9
Marijuana	11.1	6.2	7.5	22.7	23.6	18.1	25.6	25.9	25.7
Inhalants	13.5	7.3	7.8	13.6	10.4	8.5	7.4	6.8	5.8
Cocaine/crack	6.0	0.9	2.0	5.5	2.6	—	3.2	3.6	—
Amphetamines	6.1	0.7	1.7	6.4	3.2	3.4	5.8	4.5	5.9
Psychedelics	5.7	0.6	1.4	6.2	3.8	3.1	4.9	6.0	4.9
Other drugs	9.6	3.4	3.5	10.9	7.9	8.0	9.9	7.0	7.2
Cigarettes	—	11.2	10.8	—	23.3	23.0	—	28.4	26.8
Smokeless Tobacco	—	2.1	3.4	—	5.9	4.2	—	8.4	5.0
Any drug use	19.9	13.3	11.4	30.5	29.4	24.1	32.2	30.8	29.5

**TABLE 6.**

**Lifetime Use of Alcohol & Other Drugs, by Grade**

	Grade 7			Grade 9			Grade 11		
	1993-94 (%)	1995-96 (%)	1997-98 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Drug</b>									
Alcohol	52.3	57.6	52.1	73.2	73.5	73.1	83.0	82.4	80.6
Marijuana	15.6	10.9	11.3	34.7	35.0	32.8	44.2	46.9	46.3
Inhalants	22.4	18.2	16.9	27.8	26.7	24.9	18.9	22.6	20.2
Cocaine/crack	7.2	2.2	2.4	9.5	7.0	—	8.4	10.1	—
Amphetamines	7.9	1.9	2.9	10.5	9.7	10.1	13.3	13.5	13.9
Psychedelics	7.1	2.0	2.0	10.6	8.4	5.8	13.3	13.6	13.4
Other drugs	12.7	6.5	6.3	17.8	14.0	9.5	18.0	14.6	14.5
Any drug use	30.6	25.9	24.4	46.3	46.3	47.9	52.7	54.8	52.5
Cigarettes	—	30.5	25.5	—	50.6	52.2	—	60.1	56.4
Smokeless Tobacco	—	8.1	6.7	—	13.9	9.7	—	21.3	14.9
No AOD use	—	—	43.7	—	—	19.9	—	—	16.3

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### I. PREVALENCE AND LEVEL OF USE

TABLE 7.

#### Use at Least Once by Age\* & Grade Level

	7th graders % by age 11	7th graders % by age 12	9th graders % by age 14	11th graders % by age 16
<b>Alcohol</b>				
1985-86	50.8	57.8	77.6	85.0
1987-88	45.8	54.1	67.9	83.2
1989-90	43.9	50.9	66.7	81.4
1991-92	52.2	59.5	73.8	84.9
1993-94	42.1	48.8	69.9	79.8
1995-96	—	53.8	73.0	83.1
1997-98	40.9	49.6	74.6	82.3
<b>Illicit drugs</b>				
1985-86	6.6	10.7	35.7	51.4
1987-88	5.8	9.0	23.4	42.4
1989-90	6.1	8.0	21.8	35.3
1991-92	7.2	9.8	21.7	35.2
1993-94	12.5	16.1	35.7	46.6
1995-96	—	17.0	40.7	51.5
1997-98	11.0	15.5	35.3	49.2
<b>Cigarettes*</b>				
1993-94	—	26.3	45.0	52.8
1995-96	—	23.0	41.9	51.8
1997-98	—	16.5	38.7	47.3

\*Cumulative rates.

\*Cigarettes not asked until 1993 for upper grades only.

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### I. PREVALENCE AND LEVEL OF USE

TABLE 8.

#### Intoxication at Least Once by Age\* & Grade Level

	7th graders % by age 11	7th graders % by age 12	9th graders % by age 14	11th graders % by age 16
<b>Alcohol</b>				
1985-86	11.7	15.8	47.1	65.2
1987-88	10.0	14.5	37.6	61.5
1989-90	9.5	13.4	34.3	54.7
1991-92	12.7	17.4	35.8	57.3
1993-94	17.5	23.0	46.6	61.8
1995-96	—	21.5	46.2	63.0
1997-98	14.8	20.1	44.9	58.5
<b>Illicit drugs</b>				
1985-86	4.4	8.0	30.3	45.1
1987-88	3.5	6.0	19.9	36.1
1989-90	3.8	6.7	17.5	31.0
1991-92	3.8	5.5	17.8	31.1
1993-94	7.2	10.7	29.9	39.6
1995-96	—	11.8	34.3	45.6
1997-98	6.9	10.7	32.5	42.9

\*Cumulative rates.

TABLE 9.

#### Heavy Drinking Indicators, by Grade

	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Grade 7</b>				
Had five or more drinks	12.9	9.5	8.2	10.0
Ever very drunk/sick	11.7	11.6	9.4	9.4
Like feeling a lot/drunk <sup>a</sup>	5.3	5.5	3.9	7.2
<b>Grade 9</b>				
Had five or more drinks	18.8	19.4	17.4	19.8
Ever very drunk/sick	23.4	26.8	25.4	20.8
Like feeling a lot/drunk <sup>a</sup>	12.6	16.0	19.1	14.5
<b>Grade 11</b>				
Had five or more drinks	25.6	21.6	21.8	25.6
Ever very drunk/sick	40.0	40.9	41.6	37.5
Like feeling a lot/drunk <sup>a</sup>	18.6	21.3	25.8	24.8

<sup>a</sup>Likes to drink alcohol enough to feel it a lot or to get really drunk.



## APPENDIX A. SUPPLEMENTARY TREND TABLES

### I. PREVALENCE AND LEVEL OF USE

**TABLE 10.**

**High-Risk and Conventional Drug Use, Abstinence, & Excessive Alcohol Use**

	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Grade 9</b>					
High-Risk Drug Users (HRU)*	13.5	11.4	21.2	20.2	20.3
Conventional Users (CON)*	50.9	58.4	51.4	50.4	51.5
Abstainers (ABS)*	35.5	30.2	27.2	29.4	28.2
Excessive Alcohol Users (EAU)	—	18.5	21.0	23.3	19.4
Total EAU or HRU	—	22.0	29.1	28.5	21.8
<b>Grade 11</b>					
High-Risk Drug Users (HRU)*	21.4	17.6	26.6	26.8	26.9
Conventional Users (CON)*	55.0	60.9	51.2	50.6	50.4
Abstainers (ABS)*	23.7	21.5	22.3	22.6	22.7
Excessive Alcohol Users (EAU)	—	27.5	29.2	31.3	30.8
Total EAU or HRU	—	32.5	37.8	38.4	28.9

\*Refers to drug use in the past six months only.

**TABLE 11.**

**Attempts to Stop Using Alcohol, Cigarettes, Marijuana and Other Drugs, Grades 9 & 11, Users Only**

Frequency	1993 (%)	1995 (%)	1997 (%)	1993 (%)	1995 (%)	1997 (%)
Grade 9				Grade 11		
<b>Alcohol</b>						
None, but do use	74.7	74.4	76.6	77.4	76.7	76.8
Total any attempt	19.1	19.3	19.5	18.0	18.2	17.5
Once	13.1	12.5	13.6	13.5	11.4	10.9
Two or three times	3.3	4.4	3.2	3.5	4.3	5.1
Four or more times	2.7	2.4	3.0	1.0	2.4	1.5
Don't know	6.4	6.3	3.7	4.4	5.1	5.7
<b>Cigarettes</b>						
None, but do use	45.4	47.4	48.8	43.7	48.3	47.6
Total any attempt	45.9	42.8	42.5	48.4	46.5	45.6
Once	26.6	23.5	25.8	25.5	26.2	25.5
Two or three times	14.1	13.5	10.9	16.8	15.1	14.5
Four or more times	5.2	5.7	5.9	6.1	5.2	5.6
Don't know	8.8	9.9	8.7	7.8	5.2	6.8
<b>Marijuana and Other Drugs</b>						
None, but do use	58.8	60.3	65.9	55.9	60.6	57.6
Total any attempt	29.9	31.7	28.3	36.2	32.5	38.1
Once	17.9	20.2	17.3	21.7	19.4	22.0
Two or three times	7.8	8.2	6.9	11.6	9.8	11.3
Four or more times	4.2	3.3	4.0	2.9	3.3	4.7
Don't know	11.6	8.1	5.8	7.9	6.9	4.2

# APPENDIX A. SUPPLEMENTARY TREND TABLES

## II. RELATED PROBLEMS

TABLE 12.

### Involvement in Drinking and Driving During Lifetime<sup>a</sup>

	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Grade 7</b>					
<b>Frequency</b>					
Once or twice	16.7	28.2	23.1	24.3	23.6
Three to six times	2.4	5.1	6.3	4.2	5.1
More than six times	3.9	11.7	10.4	8.4	7.4
<b>Total ever</b>	<b>23.0</b>	<b>45.0</b>	<b>39.8</b>	<b>36.8</b>	<b>36.1</b>
<b>Grade 9</b>					
<b>Frequency</b>					
Once or twice	13.9	15.7	14.9	14.9	16.2
Three to six times	4.3	3.8	5.7	4.0	3.1
More than six times	4.5	5.1	7.8	7.0	4.1
<b>Total ever</b>	<b>22.7</b>	<b>24.6</b>	<b>28.3</b>	<b>25.9</b>	<b>23.4</b>
<b>Grade 11</b>					
<b>Frequency</b>					
Once or twice	21.1	22.7	20.8	20.1	20.0
Three to six times	6.4	6.7	7.6	7.1	7.4
More than six times	7.5	9.4	12.2	10.4	10.1
<b>Total ever</b>	<b>35.0</b>	<b>38.8</b>	<b>40.6</b>	<b>37.5</b>	<b>37.5</b>

<sup>a</sup>The grade 7 version of this item asks "Ever been in a car with someone who was drinking and driving?"  
The grades 9-11 version asks "Ever driven a car when you were drinking?" or  
"Been in a car when a friend was drinking and driving?"

TABLE 13.

### Ever "High" at School on Alcohol or Another Drug

	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Grade 7</b>					
<b>Frequency</b>					
Once or twice	3.3	4.3	4.8	6.6	5.6
Three to six times	0.5	0.7	0.8	0.6	1.3
More than six times	0.4	0.7	0.9	0.3	1.4
<b>Total</b>	<b>4.2</b>	<b>5.7</b>	<b>6.5</b>	<b>7.6</b>	<b>8.3</b>
<b>Grade 9</b>					
<b>Frequency</b>					
Once or twice	8.5	10.0	12.1	12.1	12.5
Three to six times	1.7	2.3	3.3	4.9	2.5
More than six times	3.3	2.3	4.8	6.3	4.9
<b>Total</b>	<b>13.5</b>	<b>14.6</b>	<b>20.2</b>	<b>23.3</b>	<b>19.9</b>
<b>Grade 11</b>					
<b>Frequency</b>					
Once or twice	10.6	14.2	14.8	13.3	13.4
Three to six times	3.8	3.3	4.5	5.1	6.0
More than six times	7.3	7.3	10.6	13.8	12.0
<b>Total</b>	<b>21.7</b>	<b>24.8</b>	<b>29.9</b>	<b>32.1</b>	<b>31.3</b>

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### II. RELATED PROBLEMS

TABLE 14.

#### Perceived Harm of Frequent Use of Alcohol, Illicit Drugs, and Cigarettes (Daily or Almost Daily)

	Alcohol			Marijuana			Cigarettes		
Harmful ratings	7	9	11	7	9	11	7	9	11
<b>Extremely</b>									
1985-86	37.9	33.5	44.0	71.9	53.4	51.7	—	—	—
1987-88	40.9	36.6	42.2	76.0	63.9	60.4	—	—	—
1989-90	46.7	41.4	48.0	76.9	67.8	66.4	—	—	—
1991-92	49.6	43.5	49.5	80.1	62.9	56.4	—	—	—
1993-94	57.7	54.3	63.1	78.4	61.9	59.4	55.5	50.5	59.0
1995-96	35.3	28.4	36.4	80.6 <sup>a</sup>	64.1 <sup>a</sup>	66.0 <sup>a</sup>	42.8	32.4	41.6
1997-98	45.8	34.7	35.8	73.2	49.8	43.5	49.9	40.5	43.4
<b>Harmless<sup>b</sup></b>									
1985-86	9.7	11.6	7.6	4.5	7.3	6.5	—	—	—
1987-88	7.7	8.2	5.7	4.0	4.7	4.6	—	—	—
1989-90	8.1	9.1	6.3	4.8	6.1	4.6	—	—	—
1991-92	5.7	6.8	5.8	3.4	6.1	7.3	—	—	—
1993-94	4.4	6.3	4.6	2.9	8.0	9.5	5.0	4.5	3.2
1995-96	10.2	12.4	7.1	4.0	5.9	5.7	5.6	7.7	4.6
1997-98	8.2	10.6	7.3	4.2	11.8	14.6	4.4	5.3	3.7

<sup>a</sup>In 1995 only, the question included "other drugs," as well as marijuana, which may account for the higher rates.

<sup>b</sup>Derived by combining the percentage of respondents who selected the "Mainly harmless" and "Harmless."

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### II. RELATED PROBLEMS

**TABLE 15.**  
**Perceived Difficulty in Obtaining Alcohol and Illicit Drugs, by Grade**

Difficulty ratings	Alcohol			Marijuana/Drugs		
	7	9	11	7	9	11
<b>Very Easy</b>						
1989-90	—	33.9	49.3	—	—	—
1991-92	17.5	33.3	50.5	—	—	—
1993-94	20.5	41.5	53.2	14.7	42.0	55.5
1995-96	23.9	40.5	48.1	14.9	39.7	54.4
1997-98	18.3	33.3	47.2	10.7	37.6	54.9
<b>Fairly Easy</b>						
1989-90	—	28.6	29.9	—	—	—
1991-92	21.8	29.8	30.7	—	—	—
1993-94	19.4	30.6	32.2	14.4	23.9	24.2
1995-96	20.8	34.2	35.3	13.4	26.2	24.7
1997-98	18.6	32.3	32.1	16.9	26.1	22.3
<b>Fairly Difficult</b>						
1989-90	—	7.0	4.7	—	—	—
1991-92	15.4	8.3	4.5	—	—	—
1993-94	10.6	5.6	3.7	11.6	6.5	2.7
1995-96	13.6	8.1	6.1	12.3	7.3	3.1
1997-98	12.7	9.9	6.4	12.6	8.4	3.3
<b>Very Difficult</b>						
1989-90	—	6.9	3.4	—	—	—
1991-92	22.8	7.7	3.6	—	—	—
1993-94	14.0	4.9	2.6	20.3	4.0	2.4
1995-96	9.1	3.8	3.3	15.6	4.1	2.7
1997-98	14.8	8.1	5.3	17.9	8.6	3.7
<b>Don't Know</b>						
1989-90	—	23.6	12.6	—	—	—
1991-92	22.5	20.9	10.7	—	—	—
1993-94	35.5	17.4	8.3	39.0	23.5	14.8
1995-96	32.6	13.5	7.2	43.8	22.7	15.1
1997-98	35.6	16.4	9.1	41.8	19.3	15.7

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### II. RELATED PROBLEMS

**TABLE 16.**  
**Perceptions of Where Most Student Drug Users Get Drugs**

	1985-86 (%)	1987-88 (%)	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Grade 7</b>							
Home	4.8	3.3	10.2	14.3	9.1	11.5	8.8
Other family	—	—	—	7.6	6.4	7.0	6.8
School	16.1	12.2	22.6	22.4	24.1	22.3	24.5
Parties*	11.6	8.5	19.0	31.8	24.4	22.8	25.3
Friends*	17.7	14.3	21.0	28.7	25.9	27.1	23.6
Dealers	7.2	6.5	15.5	21.2	14.0	13.3	12.2
Don't know	48.9	55.2	52.7	48.5	47.6	51.5	49.9
<b>Grade 9</b>							
Home	7.1	12.3	10.0	11.5	14.8	16.0	15.8
Other family	—	10.3	6.4	7.4	12.3	12.0	10.3
School	33.3	42.2	33.4	35.4	49.5	48.4	41.9
Parties*	26.9	46.6	36.7	41.4	43.4	42.9	40.6
Friends*	26.9	46.0	35.9	41.4	42.2	47.6	41.3
Dealers	14.2	27.8	25.4	27.9	24.6	28.5	23.8
Don't know	30.4	40.2	39.2	39.0	29.5	27.2	27.6
<b>Grade 11</b>							
Home	6.9	16.0	11.3	13.1	17.8	17.3	14.2
Other family	—	14.7	8.1	11.6	15.1	15.3	12.6
School	40.1	53.1	40.2	44.0	52.4	56.0	47.0
Parties*	33.2	59.1	47.7	53.4	52.8	52.2	48.6
Friends*	32.2	60.1	51.0	54.5	54.2	58.2	52.3
Dealers	20.9	42.2	34.8	38.8	30.4	35.3	27.3
Don't know	27.0	33.4	31.3	30.5	26.3	21.5	23.7

\* Outside school.

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### III. ATTITUDES AND KNOWLEDGE

**TABLE 17.**  
**Reasons for Using Alcohol or Other Drugs**

	1985-86 (%)	1987-88 (%)	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Grade 7</b>							
<b>Reason</b>							
Get away from problems	—	—	—	52.3	40.1	42.3	44.0
See what it's like	—	—	—	49.4	39.9	46.9	45.6
Because friends use	—	—	—	51.3	44.7	51.6	45.2
Have fun <sup>a</sup>	—	—	—	34.6	27.1	33.5	31.8
Bored, nothing to do	—	—	—	21.5	13.3	17.4	14.6
<b>Grade 9</b>							
<b>Reason</b>							
Get away from problems	51.3	52.0	52.7	53.6	45.7	45.1	43.5
See what it's like	48.5	52.0	46.3	52.5	48.1	54.2	49.2
Because friends use	49.4	60.5	53.0	53.4	46.5	50.2	43.2
Have fun <sup>a</sup>	49.2	45.9	43.7	48.9	45.9	52.7	46.9
Bored, nothing to do	20.5	25.4	18.6	24.1	23.4	25.8	24.7
<b>Grade 11</b>							
<b>Reason</b>							
Get away from problems	52.6	55.3	51.5	55.1	46.1	47.7	41.8
See what it's like	50.1	55.2	46.3	58.3	53.7	57.6	50.9
Because friends use	50.3	63.6	54.6	58.5	49.9	54.4	46.6
Have fun <sup>a</sup>	55.2	54.4	60.2	64.7	60.6	62.0	62.0
Bored, nothing to do	26.8	33.7	26.3	31.4	31.3	31.4	30.5

<sup>a</sup>Wording changed from "feel good" in 1987-88 to "have fun" in 1989-90.

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### III. ATTITUDES AND KNOWLEDGE

TABLE 18.

#### Knowledge of Some Regular AOD Use by Adults

	1985-86 (%)	1987-88 (%)	1989-90 (%)	1991-92* (%)	1993-94* (%)	1995-96* (%)	1997-98* (%)
<b>Grade 7</b>							
Substance							
Alcohol	—	—	—	—	—	—	—
Marijuana/hash	—	—	—	—	—	—	25.3
Cocaine or crack	—	—	—	—	—	—	17.2
Amphet/meth	—	—	—	—	—	—	13.0
<b>Grade 9</b>							
Alcohol	89.5	88.3	87.6	86.1	—	—	—
Marijuana/hash	50.9	46.1	40.7	31.7	42.5	43.4	50.0
Cocaine or crack	30.5	28.2	25.6	15.7	23.1	21.4	19.4
Amphet/meth	—	—	—	10.9	19.5	20.2	21.2
<b>Grade 11</b>							
Substance							
Alcohol	92.9	92.3	89.9	88.4	—	—	—
Marijuana/hash	60.8	56.3	48.7	39.5	48.7	52.9	58.6
Cocaine or crack	40.4	38.1	32.3	19.2	21.2	24.2	22.2
Amphet/meth	—	—	—	13.5	21.6	24.4	25.1

\*Asked about "regular use," as opposed to "any use" in the previous surveys.

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### III. ATTITUDES AND KNOWLEDGE

**TABLE 19.**

**Problems Ever Caused by Alcohol for Grades 9 & 11**

Problem	Grade 9			Grade 11		
	1993-94 (%)	1995-96 (%)	1997-98 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
Get a traffic ticket	1.5	0.4	2.4	1.3	1.2	1.9
Get arrested	1.8	1.7	1.6	1.7	2.2	2.9
Have money problems	3.0	2.6	3.5	4.2	5.0	5.1
Get into school trouble	2.6	3.3	2.2	3.1	2.6	2.6
Hurt your school work	4.9	4.7	3.0	6.0	7.0	5.1
Fight with other kids	3.9	4.9	3.6	6.0	5.3	5.3
Fight with parents	4.8	5.9	3.8	6.6	7.4	5.8
Damage a friendship	4.7	4.5	2.7	5.6	4.6	4.6
Pass out	7.8	8.0	6.5	12.7	15.1	13.2
Forget what happened	10.2	10.9	9.6	15.7	16.7	15.7
Other	—	7.3	6.3	—	8.0	6.8
Used alcohol but never had any problems	—	41.3	38.5	—	43.5	43.1
Total any problem	—	21.7	21.2	—	30.9	28.1

**TABLE 20.**

**Problems Ever Caused by Marijuana or Other Drug Use, Grades 9 & 11**

Problem	Grade 9			Grade 11		
	1993-94 (%)	1995-96 (%)	1997-98 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
Get a traffic ticket	1.5	0.5	2.0	0.9	0.8	1.5
Have a car accident	1.1	—	—	1.1	—	—
Get arrested	1.3	1.5	1.8	1.4	1.9	2.1
Have money problems	3.6	4.0	2.3	5.0	7.5	6.2
Get into trouble at school	2.7	2.9	2.5	2.8	3.7	3.3
Hurt your school work	4.0	5.4	4.6	6.0	10.0	7.3
Fight with other kids	2.1	3.8	1.5	3.4	3.0	2.8
Fight with your parents	3.0	5.3	3.2	4.5	6.4	5.0
Damage a friendship	2.7	3.0	2.7	3.8	3.9	3.7
Had a "bad trip"	6.4	6.5	5.7	8.6	8.9	8.0
Other	—	5.5	5.0	—	5.9	5.1
Used drugs but never had any problems	—	16.8	18.6	—	23.6	24.1
Total Any Problem	14.7	16.8	15.8	17.2	21.8	20.3



## APPENDIX A. SUPPLEMENTARY TREND TABLES

### III. ATTITUDES AND KNOWLEDGE

**TABLE 21.**

**Problems Ever Caused by Alcohol , Grades 9 & 11,  
Weekly Alcohol Users <sup>a</sup>**

Problem	Grade 9	Grade 11		
	1997-98 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
Get a traffic ticket	2.9	3.4	5.3	3.1
Get arrested	7.2	5.9	9.8	7.3
Have money problems	6.4	13.7	17.2	16.2
Get into school trouble	7.1	9.5	5.7	7.0
Hurt your school work	11.9	15.2	28.3	18.3
Fight with other kids	10.8	16.5	15.5	12.4
Fight with parents	19.5	17.4	24.4	14.0
Damage a friendship	12.3	10.9	10.7	9.5
Pass out	25.6	31.5	38.8	39.4
Forget what happened	27.5	37.9	46.7	37.7
Other	18.7	—	16.4	17.3
Used alcohol but never had any problems	47.4	—	29.0	34.2
Total any problem	50.0	—	73.6	64.4

<sup>a</sup> Once a week or more frequently.

**TABLE 22.**

**Problems Ever Caused by Marijuana or Other Drug Use,  
Grades 9 & 11, Weekly Users of Marijuana <sup>a</sup>**

Problem	Grade 9	Grade 11		
	1997-98 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
Get a traffic ticket	1.6	2.9	2.2	3.2
Have a car accident	—	4.2	—	—
Get arrested	7.0	5.9	6.7	8.1
Have money problems	16.0	19.1	30.5	22.5
Get into trouble at school	11.7	8.3	12.1	10.0
Hurt your school work	24.4	21.8	30.0	25.4
Fight with other kids	8.1	10.6	10.4	7.4
Fight with your parents	19.1	12.6	18.1	16.8
Damage a friendship	14.0	8.2	11.0	8.0
Had a "bad trip"	26.1	25.1	25.2	17.2
Other	20.4	—	19.5	17.9
Used drugs but never had any problems	41.4	—	34.9	35.0
Total Any Problem	52.8	52.6	66.7	57.8

<sup>a</sup> Once a week or more frequently.

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### III. ATTITUDES AND KNOWLEDGE

TABLE 23.

**Problems Ever Caused by Marijuana and Other Drug Use,  
Grades 9 & 11, Weekly Users of Other Drugs<sup>a</sup>**

Problem	Grade 9	Grade 11
	1997-98 (%)	1997-98 (%)
Get a traffic ticket	2.8	2.9
Have a car accident	—	—
Get arrested	7.2	7.1
Have money problems	15.7	22.8
Get into trouble at school	13.1	9.1
Hurt your school work	21.8	22.7
Fight with other kids	8.1	8.6
Fight with your parents	15.2	16.8
Damage a friendship	14.9	9.8
Had a "bad trip"	25.1	17.0
Other	19.2	17.6
Used drugs but never had any problems	41.4	32.5
Total Any Problem	50.9	55.5

<sup>a</sup> Once a week or more frequently.

TABLE 24.

**Involvement in Drug Sales, Past Year, Total Sample & Drug Users, Grades 9 & 11**

Frequency	Grade 9				Grade 11			
	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Total Sample</b>								
Once or twice	3.1	7.6	9.7	8.8	5.6	10.0	10.2	10.3
Three or more times	3.1	6.3	6.4	5.8	5.1	7.7	10.3	9.4
<b>Total</b>	<b>6.2</b>	<b>13.9</b>	<b>16.2</b>	<b>14.6</b>	<b>10.7</b>	<b>17.7</b>	<b>20.5</b>	<b>19.7</b>
<b>Drug Users</b>								
Once or twice	—	16.2	21.3	13.5	—	19.3	18.2	17.3
Three or more times	—	14.9	15.2	11.0	—	16.1	19.6	17.3
<b>Total</b>	<b>—</b>	<b>30.8</b>	<b>36.5</b>	<b>24.6</b>	<b>—</b>	<b>35.9</b>	<b>37.7</b>	<b>34.6</b>

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### III. ATTITUDES AND KNOWLEDGE

**TABLE 25.**  
**Sources of AOD Knowledge**

	1985-86		1989-90		1991-92		1993-94	1995-96	1997-98
	Alcohol (%)	Drugs (%)	Alcohol (%)	Drugs (%)	Alcohol (%)	Drugs (%)	AOD (%)	AOD (%)	AOD (%)
<b>Grade 7</b>									
<b>Source</b>									
Friends	—	31.6	18.8	18.6	29.9	26.5	31.8	38.6	38.3
Parents	—	38.5	44.4	36.9	52.7	45.7	39.8	45.9	45.2
School classes	—	65.6	56.0	62.9	65.7	72.1	60.6	65.3	62.1
Own experience	—	14.0	10.3	6.5	13.7	8.2	13.6	16.1	13.9
Siblings	—	—	7.7	7.3	16.4	13.7	11.7	16.1	15.5
Movies/TV	—	—	37.8	38.3	48.1	50.2	32.2	37.9	37.0
<b>Grade 9</b>									
<b>Source</b>									
Friends	—	58.6	40.8	37.1	45.3	40.8	50.9	57.6	52.4
Parents	—	29.4	45.9	34.9	49.7	40.8	38.0	37.1	38.4
School classes	—	54.2	55.2	64.0	61.8	69.5	56.7	57.7	55.7
Own experience	—	23.5	24.3	12.5	26.6	14.4	25.4	27.2	22.4
Siblings	—	—	15.5	13.9	17.7	15.2	16.9	17.0	14.8
Movies/TV	—	—	41.6	45.3	44.3	47.7	34.3	35.9	31.4
<b>Grade 11</b>									
<b>Source</b>									
Friends	—	65.6	50.6	47.7	56.8	53.7	59.2	64.9	60.3
Parents	—	29.2	43.9	29.1	45.7	33.4	36.3	38.5	36.2
School classes	—	58.5	56.7	64.1	57.4	66.7	54.5	55.4	55.5
Own experience	—	37.5	36.9	21.4	42.8	22.3	38.6	41.1	36.5
Siblings	—	—	17.1	13.3	18.7	15.1	19.5	18.4	17.4
Movies/TV	—	—	40.1	43.6	42.3	46.9	34.2	39.3	33.0

# APPENDIX A. SUPPLEMENTARY TREND TABLES

## III. ATTITUDES AND KNOWLEDGE

**TABLE 26.**  
**Effects of AOD Education by Grade Level**

	1985-86 (%)	1987-88 (%)	1989-90 (%)	1991-92 (%)	1993-94 (%)	1995-96 (%)	1997-98 (%)
<b>Grade 7</b>							
<b>Effect</b>							
Never had classes/programs	—	—	—	—	—	15.6	18.6
Avoid/reduce alcohol use	—	—	—	—	—	47.8	46.6
Avoid/reduce other drug use	—	—	—	—	—	43.7	44.8
Resist pressure from others	—	—	—	—	—	28.8	28.5
Learned alcohol/drugs harmful	—	—	—	—	—	40.3	43.2
Helped deal with feelings	—	—	—	—	—	15.0	14.0
Helped seek treatment/counseling	—	—	—	—	—	4.5	4.9
Helped me talk with parents	—	—	—	—	—	6.5	7.0
Not affected me, learned nothing	—	—	—	—	—	5.4	3.8
Already decided not to use or drink	—	—	—	—	—	23.3	25.7
Made me more interested in trying alcohol and drugs	—	—	—	—	—	5.5	4.9
<b>Grade 9</b>							
<b>Effect</b>							
Never had classes/programs	—	—	11.8	13.9	20.9	10.6	13.0
Avoid/reduce alcohol use	36.9	46.6	45.3	40.6	34.2	32.6	34.4
Avoid/reduce other drug use	29.0	46.0	45.7	39.0	30.1	31.5	29.8
Resist pressure from others	32.1	36.7	35.8	30.7	25.0	23.1	21.6
Learned alcohol/drugs harmful	—	55.8	59.9	46.4	34.7	35.7	34.1
Helped deal with feelings	—	22.5	23.4	18.0	10.5	9.8	8.2
Helped seek treatment/counseling	—	24.1	—	6.7	2.9	1.9	1.8
Helped me talk with parents	—	17.3	17.0	8.7	4.4	4.4	2.7
Not affected me, learned nothing	—	9.2	8.0	7.9	7.1	12.3	9.3
Already decided not to use or drink	32.4	40.9	39.8	35.2	20.9	23.1	19.8
Made me more interested in trying alcohol and drugs	—	—	—	—	8.4	9.4	7.1
<b>Grade 11</b>							
<b>Effect</b>							
Never had classes/programs	—	—	9.5	10.9	14.8	19.9	11.5
Avoid/reduce alcohol use	36.5	46.9	44.5	40.0	31.2	29.0	28.1
Avoid/reduce other drug use	33.0	45.5	44.6	40.7	29.3	28.9	26.1
Resist pressure from others	34.8	36.4	34.5	31.5	21.4	20.5	20.9
Learned alcohol/drugs harmful	—	63.1	62.5	54.5	39.9	39.0	38.8
Helped deal with feelings	—	20.6	20.6	18.6	10.9	9.5	8.8
Helped seek treatment/counseling	—	20.8	—	5.6	2.6	1.5	3.0
Helped me talk with parents	—	14.0	13.8	7.8	4.3	3.8	3.8
Not affected me, learned nothing	—	9.7	7.6	10.9	10.6	16.4	14.5
Already decided not to use or drink	31.2	40.1	38.4	34.0	24.9	24.8	22.4
Made me more interested in trying alcohol and drugs	—	—	—	—	9.0	6.8	7.2

# APPENDIX A. SUPPLEMENTARY TREND TABLES

## IV. MONITORING THE FUTURE

TABLE 27.

Comparison of California and National (MTF) AOD Use Rates, Grades 7&8

Substance Use	CSS 7th				Monitoring the Future Survey 8th						
	1991 (%)	1993 (%)	1995 (%)	1997 (%)	1991 (%)	1992 (%)	1993 (%)	1994 (%)	1995 (%)	1996 (%)	1997 (%)
<b>Lifetime</b>											
Alcohol	—	52.3	57.6	52.1	70.1	69.3	67.1	55.8	54.5	55.3	53.8
Been drunk	17.4	23.0	21.5	20.1	26.7	26.8	26.4	25.9	25.3	26.8	25.2
Cigarettes	—		30.5	25.5	44.0	45.2	45.3	46.1	46.4	49.2	47.3
Marijuana	—	15.6	10.9	11.3	10.2	11.2	12.6	16.7	19.9	23.1	22.6
Inhalants	—	22.4	18.2	16.9	17.6	17.4	19.4	19.9	21.6	21.2	21.0
Cocaine/crack	—	7.2	2.2	2.4	2.3	2.9	2.9	3.6	4.2	4.5	4.4
Amphetamine/stimulants	—	7.9	1.9	2.9	10.5	10.8	11.8	12.3	13.1	13.5	12.3
Psychedelics	—	7.1	2.0	2.0	3.2	3.8	3.9	4.3	5.2	5.9	5.4
Any illicit drug	—	30.6	25.9	24.4	18.7	20.6	22.5	25.7	28.5	31.2	29.4
Been intoxicated	5.5	10.7	11.8	10.7	—	—	—	—	—	—	—
Crack	—	—	—	—	1.3	1.6	1.7	2.4	2.7	2.9	2.7
<b>Past 6 (CSS)/12 (MTF) months</b>											
Alcohol	53.2	53.1	50.3	47.2	54.0	53.7	51.6	46.8	45.3	46.5	45.5
Any illicit drug	20.2	24.6	26.2	27.2	11.3	12.9	15.1	18.5	21.4	23.6	22.1
Marijuana	7.7	11.1	10.9	11.2	6.2	7.2	9.2	13.0	15.8	18.3	17.7
Other illicit drugs	17.0	20.5	21.0	22.8	8.4	9.3	10.4	11.3	12.6	13.1	11.8
Cocaine	2.9	2.8	1.8	3.1	1.1	1.5	1.7	2.1	2.6	3.0	2.8
Amphetamine/stimulant	2.0	2.9	2.5	2.6	6.2	6.5	7.2	7.9	8.7	9.1	8.1
Barbiturates	1.3	1.4	0.8	0.9	—	—	—	—	—	—	—
Inhalants	12.5	16.5	15.6	18.3	9.0	9.5	11.0	11.7	12.8	12.2	11.8
LSD	1.5	2.5	2.2	1.8	1.7	2.1	2.3	2.4	3.2	3.5	3.2
<b>Past month</b>											
Alcohol	—	27.8	23.2	21.7	25.1	26.1	26.2	25.5	24.6	26.2	24.5
Heavy (5+ drinks row)	12.9	9.5	8.2	10.0	12.9	13.4	13.5	14.5	14.5	15.6	14.5
Marijuana	—	11.1	6.2	7.5	3.2	3.7	5.1	7.8	9.1	11.3	10.2
Inhalants	—	13.5	7.3	7.8	4.4	4.7	5.4	5.6	6.1	5.8	5.6
Cocaine	—	6.0	0.9	2.0	0.5	0.7	0.7	1.0	1.2	1.3	1.1
Amp./Meth.	—	6.1	0.7	1.7	2.6	3.3	3.6	3.6	4.2	4.6	3.8
Psychedelics	—	5.7	0.6	1.4	0.8	1.1	1.2	1.3	1.7	1.9	1.8
Cigarettes	17.5	17.7	15.1	13.4	14.3	15.5	16.7	18.6	19.1	21.0	19.4
Daily	4.4	3.7	2.0	2.0	7.2	7.0	8.3	8.8	9.3	10.4	9.0

## APPENDIX A. SUPPLEMENTARY TREND TABLES

### IV. MONITORING THE FUTURE

TABLE 28.

**Comparison of California and National (MTF) AOD Use Rates, Grades 9&10**

Substance Use	CSS 9th				Monitoring the Future Survey 10th						
	1991 (%)	1993 (%)	1995 (%)	1997 (%)	1991 (%)	1992 (%)	1993 (%)	1994 (%)	1995 (%)	1996 (%)	1997 (%)
<b>Lifetime</b>											
Alcohol	—	73.2	73.5	73.1	83.8	82.3	80.8	71.1	70.5	71.8	72.0
Been drunk	35.8	46.6	46.2	44.9	50.0	47.7	47.9	47.2	46.9	48.5	49.4
Cigarettes	—	—	50.6	52.2	55.1	53.5	56.3	56.9	57.6	61.2	60.2
Marijuana	—	34.7	35.0	32.8	23.4	21.4	24.4	30.4	34.1	39.8	42.3
Inhalants	—	27.8	26.7	24.9	15.7	16.6	17.5	18.0	19.0	19.3	18.3
Cocaine/crack	—	9.5	7.0	—	4.1	3.3	3.6	4.3	5.0	6.5	7.1
Amphetamine/stimulants	—	10.5	9.7	10.1	13.2	13.1	14.9	15.1	17.4	17.7	17.0
Psychedelics	—	10.6	8.4	5.8	6.1	6.4	6.8	8.1	9.3	10.5	10.5
Any illicit drug	—	46.3	46.3	47.9	30.6	29.8	32.8	37.4	40.9	45.4	47.3
Been intoxicated	17.8	29.9	34.3	32.5	—	—	—	—	—	—	—
Crack	—	—	—	—	1.7	1.5	1.8	2.1	2.8	3.3	3.6
<b>Past 6 (CSS)/12 (MTF) months</b>											
Alcohol	67.4	68.6	67.2	67.3	72.3	70.2	69.3	63.9	63.5	65.0	65.2
Any illicit drug	40.9	41.6	43.1	43.4	21.4	20.4	24.7	30.0	33.3	37.5	38.5
Marijuana	19.4	30.4	34.2	32.5	16.5	15.2	19.2	25.2	28.7	33.6	34.8
Other illicit drugs	20.1	30.1	31.7	30.1	12.2	12.3	13.9	15.2	17.5	18.4	18.2
Cocaine	3.6	6.1	6.4	5.7	2.2	1.9	2.1	2.8	3.5	4.2	4.7
Amphetamine/stimulant	3.3	7.5	10.8	8.0	8.2	8.2	9.6	10.2	11.9	12.4	12.1
Barbiturates	1.3	2.3	1.2	1.0	—	—	—	—	—	—	—
Inhalants	11.8	21.5	21.9	21.1	7.1	7.5	8.4	9.1	9.6	9.5	8.7
LSD	3.8	8.6	9.9	5.9	3.7	4.0	4.2	5.2	6.5	6.9	6.7
<b>Past month</b>											
Alcohol	—	43.5	39.2	37.5	42.8	39.9	41.5	39.2	38.8	40.4	40.1
Heavy (5+ drinks row)	18.8	19.4	17.4	19.8	22.9	21.1	23.0	23.6	24.0	24.8	25.1
Marijuana	—	22.7	23.6	18.1	8.7	8.1	10.9	15.8	17.2	20.4	20.5
Inhalants	—	13.6	10.4	8.5	2.7	2.7	3.3	3.6	3.5	3.3	3.0
Cocaine	—	5.5	2.6	—	0.7	0.7	0.9	1.2	1.7	1.7	2.0
Amp./Meth.	—	6.4	3.2	3.4	3.3	3.6	4.3	4.5	5.3	5.5	5.1
Psychedelics	—	6.2	3.8	3.1	1.6	1.8	1.9	2.4	3.3	2.8	3.3
Cigarettes	25.9	30.2	28.2	29.0	20.8	21.5	24.7	25.4	27.9	30.4	29.8
Daily	6.3	8.6	8.4	7.2	12.6	12.3	14.2	14.6	16.3	18.3	18.0

# APPENDIX A. SUPPLEMENTARY TREND TABLES

## IV. MONITORING THE FUTURE

TABLE 29.

Comparison of California and National (MTF) AOD Use Rates, Grades 11&12

Substance Use	CSS 11th			Monitoring the Future Survey 12th							
	1991 (%)	1993 (%)	1995 (%)	1997 (%)	1991 (%)	1992 (%)	1993 (%)	1994 (%)	1995 (%)	1996 (%)	1997 (%)
<b>Lifetime</b>											
Alcohol	84.9 <sup>a</sup>	83.0 <sup>a</sup>	82.4	80.6	88.0	87.5	87.0	80.4	80.7	79.2	81.7
Been drunk	57.3	61.8	63.0	58.5	65.4	63.4	62.5	62.9	63.2	61.8	64.2
Cigarettes	49.1	52.8	60.1	56.4	63.1	61.8	61.9	62.0	64.2	63.5	65.4
Marijuana	—	44.2	46.9	46.3	36.7	32.6	35.3	38.2	41.7	44.9	49.6
Inhalants	—	18.9	22.6	20.2	17.6	16.6	17.4	17.7	17.4	16.6	16.1
Cocaine/crack	—	8.4	10.1	—	7.8	6.1	6.1	5.9	6.0	7.1	8.7
Amphetamine/stimulants	—	13.3	13.5	13.9	15.4	13.9	15.1	15.7	15.3	15.3	16.5
Psychedelics	—	13.3	13.6	13.4	9.6	9.2	10.9	11.4	12.7	14.0	15.1
Any illicit drug	35.3	52.7	54.8	52.5	44.1	40.7	42.9	45.6	48.4	50.8	54.3
Been intoxicated	31.1	39.6	45.7	42.9	—	—	—	—	—	—	—
Crack	4.5	8.6	6.1	—	3.1	2.6	2.6	3.0	3.0	3.3	3.9
<b>Past 6 (CSS)/12 (MTF) months</b>											
Alcohol	76.5	74.3	75.3	74.8	77.7	76.8	76.0	73.0	73.7	72.5	74.8
Any illicit drug	37.7	46.5	49.4	48.7	29.4	27.1	31.0	35.8	39.0	40.2	42.4
Marijuana	29.4	40.0	42.8	41.6	23.9	21.9	26.0	30.7	34.7	35.8	38.5
Other illicit drugs	23.2	28.5	28.0	30.5	16.2	14.9	17.1	18.0	19.4	19.8	20.7
Cocaine	6.6	4.9	7.2	7.9	3.5	3.1	3.3	3.6	4.0	4.9	5.5
Amphetamine/stimulant	6.8	10.1	10.4	12.0	8.2	7.1	8.4	9.4	9.3	9.5	10.2
Barbiturates	2.1	1.7	1.5	1.6	3.4	2.8	3.4	4.1	4.7	4.9	5.1
Inhalants	10.3	13.1	14.7	14.8	6.6	6.2	7.0	7.7	8.0	7.6	6.7
LSD	8.1	12.2	10.8	9.8	5.2	5.6	6.8	6.9	8.4	8.8	8.4
<b>Past month</b>											
Alcohol	—	50.1	47.7	46.9	54.0	51.3	51.0	50.1	51.3	50.8	52.7
Heavy (5+ drinks row)	25.6	21.6	21.8	25.6	29.8	27.9	27.5	28.2	29.8	30.2	31.3
Marijuana	—	25.6	25.9	25.7	13.8	11.9	15.5	19.0	21.2	21.9	23.7
Inhalants	—	7.4	6.8	5.8	2.4	2.3	2.5	2.7	3.2	2.5	2.5
Cocaine	—	3.2	3.6	—	1.4	1.3	1.3	1.5	1.8	2.0	2.3
Amp./Meth.	—	5.8	4.5	5.9	3.2	2.8	3.7	4.0	4.0	4.1	4.8
Psychedelics	—	4.9	6.0	4.9	2.2	2.1	2.7	3.1	4.4	3.5	3.9
Cigarettes	28.5	29.1	30.5	29.3	28.3	27.8	29.9	31.2	33.5	34.0	36.5
Daily	9.7	12.3	11.6	11.0	18.5	17.2	19.0	19.4	21.6	22.2	24.6

## APPENDIX B. CALIFORNIA STUDENT SURVEY

### ***1997-98 California Student Survey of Substance Use and Other Behaviors***

#### ***Grades 9 and 11***

- **This is a survey about the use of alcohol, marijuana, and other drugs. It also asks about other related behaviors and attitudes.**
- **This survey is voluntary. You do not have to complete this survey, but we hope that you will decide to do so.**
- **Do not write your name on this form or the answer sheet. Do not identify yourself in any other way.**
- **Please mark all of your answers on the answer sheet. Do not write on the survey questionnaire. Mark only one answer unless told to “Mark All That Apply.”**
- **This survey asks about things you may have done during different periods of time, such as during your lifetime (for example, did you ever drink alcohol?), the past year, or the past month. Please pay careful attention to these time periods.**

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## **APPENDIX B. CALIFORNIA STUDENT SURVEY**

### **DEFINITIONS**

#### **Alcohol**

- Refers to beer, wine, wine coolers, or liquor (distilled spirits).

One drink means: one regular size can/bottle of beer or wine cooler, one glass of wine, one mixed drink, or one short glass of liquor

#### **Cigarettes**

- Refers to tobacco cigarettes. Questions about the use of “drugs” or “substances” do not mean tobacco.

#### **Drug**

- Means any substances other than alcohol, steroids, or tobacco.

#### **Inhalants**

- Refers to things that you “sniff” or “huff” to get high, such as glue, gas, gasoline, sprays.

#### **Methamphetamine**

- Refers to crystal meth, speed, ice, crank, etc.

APPENDIX B. CALIFORNIA STUDENT SURVEY

These first questions you fill out at the top of the answer sheet.

Name of your school: \_\_\_\_\_

Your grade level (check one): 9th \_\_\_\_ 10th \_\_\_\_ 11th \_\_\_\_ 12th \_\_\_\_

Sex (check one): Male \_\_\_\_ Female \_\_\_\_

Born in the USA? (check one): Yes \_\_\_\_ No \_\_\_\_

Age (in years) \_\_\_\_

Which racial or ethnic group do you primarily identify with?  
(Mark only one letter on the answer sheet.)

- American Indian or Native American ..... (A)
- Asian or Pacific Islander American ..... (B)  
(for example, of Chinese, Filipino, Japanese, Korean  
Cambodian, Vietnamese, Laotian, or Samoan descent)
- Black or African American (non-Hispanic) ..... (C)
- Hispanic or Latin American: ..... (D)  
(for example, of Mexican, South American, Central American,  
Cuban, or Puerto Rican descent)
- White (Caucasian/non-Hispanic) ..... (E)
- Mixed Race or Ethnicity ..... (F)  
(More than one of the following ethnic groups: American Indian,  
Asian/Pacific Islander, Black, Hispanic, or White)
- Other ..... (G)

# APPENDIX B. CALIFORNIA STUDENT SURVEY

**How often did you use these kinds of substances without a doctor's orders  
in the last six months?**

(Please mark only one answer on the answer sheet for *each* question.)

	Never	Once or twice	A few times	Once a month	Once a week	Few times a week	Once a day	More than once a day
1. Beer	A	B	C	D	E	F	G	H
2. Wine (including wine coolers)	A	B	C	D	E	F	G	H
3. Liquor (whiskey, vodka, gin, etc.)	A	B	C	D	E	F	G	H
4. Marijuana (grass, pot, weed, sins, bud, etc.)	A	B	C	D	E	F	G	H
5. Hashish (hash, hash oil, etc.)	A	B	C	D	E	F	G	H
6. Methamphetamines or Amphetamines (crank, meth, speed, crystal, ice, bennies, black beauties, etc.)	A	B	C	D	E	F	G	H
7. Cocaine (coke, crack, rock, base, snort, snow, flake)	A	B	C	D	E	F	G	H
8. LSD (acid, windowpane, blotter)	A	B	C	D	E	F	G	H
9. Metabene (rollers, wagon wheels)	A	B	C	D	E	F	G	H
10. Other psychedelics (mescaline, peyote, psilocybin, MDMA, ecstasy, adam, EXTC)	A	B	C	D	E	F	G	H

# APPENDIX B. CALIFORNIA STUDENT SURVEY

	Never	Once or twice	A few times	Once a month	Once a week	Few times a week	Once a day	More than once a day
11. Barbiturates (barbs, reds, yellows, Nembutal, Seconal, Amytal)	A	B	C	D	E	F	G	H
12. Sedatives (Quaaludes, ludes, sopers, Doriden)	A	B	C	D	E	F	G	H
13. Tranquilizers (Valium, Librium, Xanax, Thorazine, Miltown, etc.)	A	B	C	D	E	F	G	H
14. Inhalants (sniffing glue, paint, butane, gasoline, amyl or butyl nitrate, rush, poppers, laughing gas)	A	B	C	D	E	F	G	H
15. PCP (angel dust, juice, wack, sherm, super cool)	A	B	C	D	E	F	G	H
16. Heroin (smack, tar, china white, goma, brown)	A	B	C	D	E	F	G	H
17. Other narcotics (codeine, morphine, opium, Demerol, Percodan)	A	B	C	D	E	F	G	H

**APPENDIX B. CALIFORNIA STUDENT SURVEY**

**MAKE SURE YOU ARE NOW ON #18 ON THE ANSWER SHEET.**

18. In the *last six months*, how often did you use *more than one* substance on the *same occasion*? For example, alcohol with marijuana, or cocaine with pills.
- (A) Never, I have not used more than one substance on the same occasion
  - (B) Once or twice
  - (C) 3 to 6 times
  - (D) 7 to 10 times
  - (E) More than 10 times

---

**In your lifetime, have you ever used or tried any of the following substances?**

	No	Yes
19. Tobacco cigarettes	(A)	(B)
20. Smokeless tobacco (chew or snuff such as Redman, Skoal, or Copenhagen)	(A)	(B)
21. Alcohol (beer, wine, wine coolers, or liquor)	(A)	(B)
22. Inhalants (drugs that you "sniff" or "huff," to get high, like sniffing glue, paint, gas, gasoline, rush, poppers, laughing gas)	(A)	(B)
23. Marijuana (grass, pot, weed, sins, buds)	(A)	(B)
24. Methamphetamines or amphetamines (meth, speed, crank)	(A)	(B)
25. Psychedelics (LSD, mescaline, psilocybin, ecstasy)	(A)	(B)
26. Any other drug not already mentioned above	(A)	(B)

**APPENDIX B. CALIFORNIA STUDENT SURVEY**  
**PLEASE MAKE SURE YOU ARE NOW ON**  
**#27 ON THE ANSWER SHEET.**

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**During the last 30 days, have you used any of the following substances?**

	<u>No</u>	<u>Yes</u>
27. Tobacco cigarettes	(A)	(B)
28. Smokeless tobacco (chew or snuff such as Redman, Skoal, or Copenhagen)	(A)	(B)
29. Alcohol (beer, wine, wine coolers, or liquor)	(A)	(B)
30. Inhalants (drugs that you "sniff" or "huff," to get high, like sniffing glue, paint, gas, gasoline, rush, poppers, laughing gas)	(A)	(B)
31. Marijuana (grass, pot, weed, sins, buds)	(A)	(B)
32. Methamphetamines or amphetamines (meth, speed, crank)	(A)	(B)
33. Psychedelics (LSD, mescaline, psilocybin, ecstasy)	(A)	(B)
34. Any other drug not already mentioned above	(A)	(B)

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35. In the *last month*, how often have you smoked tobacco cigarettes?

- (A) Never, I didn't smoke cigarettes
- (B) Once to a few times
- (C) More than a few times but not every day
- (D) About 1 or 2 cigarettes a day
- (E) About 3 to 6 cigarettes a day
- (F) About 7 to 10 cigarettes a day (up to half a pack)
- (G) About 11 to 20 cigarettes a day (up to a pack)
- (H) More than 20 cigarettes a day (more than a pack)

## APPENDIX B. CALIFORNIA STUDENT SURVEY

**THE NEXT TWO QUESTIONS ASK ABOUT HAVING A DRINK OF AN ALCOHOLIC BEVERAGE.**

**A DRINK MEANS ONE REGULAR SIZE CAN/BOTTLE OF BEER OR WINE COOLER, ONE GLASS OF WINE, ONE MIXED DRINK, OR ONE SHORT GLASS OF LIQUOR.)**

36. How much alcohol did you drink just before you took a drug for the first time (on the same occasion)?
- (A) Have never used drugs
  - (B) None, did not drink alcohol before
  - (C) A little (one drink)
  - (D) Two drinks
  - (E) Quite a bit, 3 or more drinks
37. Over the *past two weeks*, how many times have you had five or more alcoholic drinks in a row?
- (A) None
  - (B) Once
  - (C) Twice
  - (D) 3 to 6 times
  - (E) 7 to 9 times
  - (F) 10 times or more

**About how old were you the first time you did any of these things:**

		Years of Age									
		Never	10 or under	11	12	13	14	15	16	17	18 or over
38.	Had an alcoholic drink	A	B	C	D	E	F	G	H	I	J
39.	Felt high or drunk from any alcoholic beverage	A	B	C	D	E	F	G	H	I	J
40.	Tried any drug (not alcohol), such as marijuana, inhalants, etc.	A	B	C	D	E	F	G	H	I	J
41.	Felt high or loaded from any drug	A	B	C	D	E	F	G	H	I	J
42.	Smoked a whole cigarette	A	B	C	D	E	F	G	H	I	J

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PLEASE MAKE SURE YOU ARE NOW ON  
#43 ON THE ANSWER SHEET.

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43. Have you *ever* been “high” at school on alcohol or another drug?
- (A) Never
  - (B) Once or twice
  - (C) 3 to 6 times
  - (D) More than 6 times
44. Have you *ever* driven a car when you were drinking or been in a car with friends who were drinking and driving?
- (A) Never
  - (B) Once or twice
  - (C) 3 to 6 times
  - (D) More than 6 times
45. Have you *ever* felt that you needed counseling or treatment for your alcohol *or* other drug use?
- (A) No, I never used alcohol or other drugs
  - (B) No, but I do use alcohol or other drugs
  - (C) Yes, I did feel I needed counseling or treatment
  - (D) Don’t know
46. Have you *ever* gotten very drunk or sick after drinking alcohol?
- (A) Never, I don’t drink alcohol
  - (B) Never gotten very drunk or sick
  - (C) Once or twice
  - (D) 3 to 6 times
  - (E) More than 6 times
47. How do you like to drink alcohol?
- (A) I don’t drink alcohol
  - (B) Just a sip or two
  - (C) Enough to feel it a little
  - (D) Enough to feel it a lot
  - (E) Until I get really drunk



**APPENDIX B. CALIFORNIA STUDENT SURVEY**

**How difficult is it for kids in your grade level to get any of the following types of drugs if they really want them?**

		<u>Very Difficult</u>	<u>Fairly Difficult</u>	<u>Fairly Easy</u>	<u>Very Easy</u>	<u>Don't Know</u>
48.	Tobacco cigarettes	A	B	C	D	E
49.	Alcohol (beer, wine, liquor)	A	B	C	D	E
50.	Marijuana	A	B	C	D	E
51.	Other drugs	A	B	C	D	E

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**PLEASE MAKE SURE YOU ARE NOW ON  
#52 ON THE ANSWER SHEET.**

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**How many times have you tried to quit or stop using alcohol, tobacco cigarettes, or other drugs?**

		<u>Does Not Apply Never Used</u>	<u>None</u>	<u>Once</u>	<u>2-3 Times</u>	<u>4 or more Times</u>	<u>Don't Know</u>
52.	Cigarettes (tobacco)	A	B	C	D	E	F
53.	Alcohol (beer, wine, liquor)	A	B	C	D	E	F
54.	Other drugs (marijuana, cocaine, etc.)	A	B	C	D	E	F

**APPENDIX B. CALIFORNIA STUDENT SURVEY**

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**PLEASE MAKE SURE YOU ARE NOW ON  
#55 ON THE ANSWER SHEET.**

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**How harmful do you think it is to use the following substances frequently (daily or almost daily)?**

		<u>Extremely Harmful</u>	<u>Harmful</u>	<u>Somewhat Harmful</u>	<u>Mainly Harmless</u>	<u>Harmless</u>
55.	Tobacco cigarettes	A	B	C	D	E
56.	Alcohol (beer, wine, liquor)	A	B	C	D	E
57.	Marijuana	A	B	C	D	E

**How many adults do you know who regularly use (about once a week) the following drugs:**

		<u>None</u>	<u>Some</u>	<u>Many</u>	<u>Most</u>	<u>All</u>
58.	Marijuana or hashish	A	B	C	D	E
59.	Cocaine or crack	A	B	C	D	E
60.	Methamphetamines or amphetamines (meth, speed, cran	A	B	C	D	E

**APPENDIX B. CALIFORNIA STUDENT SURVEY**

61. A lot of what I know about alcohol and drugs I learned from...  
(Mark all that apply.)
- (A) My friends
  - (B) My parents
  - (C) School classes or programs
  - (D) My own experience
  - (E) Brothers or sisters
  - (F) Movies, television
  - (G) Other
62. Where do *most* kids at your school who use drugs get them?  
(Mark all that apply.)
- (A) At school (friends)
  - (B) At parties or social events outside school
  - (C) From friends outside of school or parties
  - (D) At home (parents, brothers/sisters)
  - (E) From other family members not at home
  - (F) Directly from dealers in the community
  - (G) Other
  - (H) Don't know
63. Why do you think kids *your age* use alcohol or other drugs?  
(Mark all that apply.)
- (A) To get away from their problems
  - (B) To see what it's like
  - (C) Because their friends do
  - (D) To have fun
  - (E) Bored, nothing else to do
  - (F) Other
  - (G) Don't know

**APPENDIX B. CALIFORNIA STUDENT SURVEY**

**PLEASE MAKE SURE YOU ARE NOW ON  
#64 ON THE ANSWER SHEET.**

The next questions are about other experiences you may have had. Over the past 12 months, how often have you... (Mark only one answer for each question.)

		<u>Never</u>	<u>Once</u>	<u>Twice</u>	<u>3 to 4 Times</u>	<u>5 more Times</u>
64.	Been absent from school all day without written excuse or permission	A	B	C	D	E
65.	Been suspended from school	A	B	C	D	E
66.	Damaged school property	A	B	C	D	E
67.	Marked graffiti or been a member of a tagging crew	A	B	C	D	E
68.	Been injured by someone at school	A	B	C	D	E
69.	Been threatened or bullied by someone at school	A	B	C	D	E
70.	Been afraid of being beaten up at school	A	B	C	D	E
71.	Been in a physical fight at school	A	B	C	D	E
72.	Been in a fight between a group of your friends and another group	A	B	C	D	E
73.	Been drunk or high at school	A	B	C	D	E
74.	Been involved in selling drugs	A	B	C	D	E
75.	Taken a gun to school	A	B	C	D	E
76.	Taken any weapon (knife, gun, or club) to school	A	B	C	D	E
77.	Used a knife, gun, club, or some other weapon to threaten or bully someone	A	B	C	D	E
78.	Been arrested by the police or sheriff	A	B	C	D	E
79.	Been physically injured by another student because of your race, ethnicity, sex, or disability	A	B	C	D	E

**APPENDIX B. CALIFORNIA STUDENT SURVEY**

80. Has *your* drinking alcohol ever caused *you* to have any of the following problems? (Mark all that apply.)
- (A) Does not apply, I never drank alcohol
  - (B) Get a traffic ticket or have an accident
  - (C) Get arrested
  - (D) Have money problems
  - (E) Get into trouble in school
  - (F) Hurt your school work
  - (G) Fight with other kids
  - (H) Fight with your parents
  - (I) Damage a friendship
  - (J) Pass out
  - (K) Forget what happened while drinking
  - (L) Other problems
  - (M) I've drunk alcohol but never had any problems
81. Has *your* use of marijuana or other drugs ever caused *you* to have any of the following problems? (Mark all that apply.)
- (A) Does not apply, I never used marijuana or other drugs
  - (B) Get a traffic ticket or have an accident
  - (C) Get arrested
  - (D) Have money problems
  - (E) Get into trouble in school
  - (F) Hurt your school work
  - (G) Fight with other kids
  - (H) Fight with your parents
  - (I) Damage a friendship
  - (J) Have a "bad trip"
  - (K) Other problems
  - (L) I've used drugs but never had any problems
82. How often have you thought about quitting school in *the past 12 months*?
- (A) Never
  - (B) Not very often
  - (C) Sometimes
  - (D) Very often
  - (E) Most of the time

**The next questions are about violence and safety.**  
**YOU SHOULD BE ON #83 ON THE ANSWER SHEET.**

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83. During the *past 12 months*, what have you done to deal with concerns over violence and safety? (Mark all that apply.)
- (A) Talked to your parents or other relative about it
  - (B) Talked to an adult at school about it
  - (C) Talked to another adult about it (such as a minister or coach)
  - (D) Talked to friends about it
  - (E) Been in a program that teaches how to resolve a dispute or conflict and to avoid violence
  - (F) Did an activity or something else to help make your school safer
  - (G) Did an activity or something else to help make your neighborhood safer
  - (H) Other
  - (I) Nothing
84. How safe do you feel when you are at school?
- (A) Very safe
  - (B) Safe
  - (C) Somewhat safe
  - (D) Unsafe
  - (E) Very unsafe
85. How safe do you feel when you are in the neighborhood where you live?
- (A) Very safe
  - (B) Safe
  - (C) Somewhat safe
  - (D) Unsafe
  - (E) Very unsafe
86. Have you ever been taught in school about how to avoid fighting and violence (such as in a class, assembly, or special program)?
- (A) No
  - (B) Yes
87. Have you *ever* belonged to a gang?
- (A) No
  - (B) Yes

**APPENDIX B. CALIFORNIA STUDENT SURVEY**

88. In answering these questions, I was:
- (A) Honest on all of the questions
  - (B) Honest on most of the questions
  - (C) Not honest on a lot of the questions

---

**The next questions are about activities and programs to prevent or stop alcohol and drug use.**

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89. What alcohol, or other drug use prevention activities have you done at your school *in the past 12 months*? (Mark all that apply.)
- (A) Received information as part of course (such as health education, life skills, or science)
  - (B) Attended assemblies that talked about drug or alcohol use
  - (C) Attended a sober or drug-free dance or other social event (such as Friday Night Live)
  - (D) Been a member of a student prevention organization or club (such as SADD, Friday Night Live)
  - (E) Participated in an essay or art contest about alcohol or drug use
  - (F) Listened to a guest speaker in a class (such as a former drug user, nurse)
  - (G) Signed a contract not to use alcohol or other drugs
  - (H) Signed a contract not to drink and drive
  - (I) Talked to another student about not using alcohol or other drugs
  - (J) Other
  - (K) Nothing
  - (L) Don't know
90. How has what you learned in school about alcohol or other drugs affected you? (Mark all that apply.)
- (A) Never had classes or programs on alcohol or drugs in school
  - (B) Learned to avoid or reduce use of alcohol
  - (C) Learned to avoid or reduce use of drugs
  - (D) Helped me resist pressure from my friends to use drugs or alcohol
  - (E) Learned how alcohol and other drugs can be harmful to my health
  - (F) Helped me to understand and deal with my feelings
  - (G) Helped me seek treatment or counseling for my alcohol or drug use
  - (H) Helped me talk with my parents about my alcohol or drug use
  - (I) Has not affected me or not taught me anything
  - (J) Had already decided on my own not to use drugs or drink alcohol
  - (K) Made me more interested in trying alcohol or drugs

**APPENDIX B. CALIFORNIA STUDENT SURVEY**

**Here are questions about seeking help  
to stop or reduce alcohol or drug use.**

91. In your opinion, what would happen to a student at your school who has problems with alcohol or drug use? (Mark all that apply.)
- (A) Would get help at school from a counselor, teacher or other adult
  - (B) Would get help at school from another student
  - (C) Would be able to join a self-help group with other students at school
  - (D) Would be expelled or transferred to another school
  - (E) Would be referred or sent to an outside program or agency for help
  - (F) Would not receive any help at school
  - (G) Don't know

**Have you ever talked about stopping use of alcohol, marijuana, or other drugs with any of the following?**

- |  | No | Yes | Don't Know |
|--|----|-----|------------|
| 92. Another student in a peer counseling or tutoring program at school                   | A  | B   | C          |
| 93. An adult at school, such as a counselor, teacher, or coach                           | A  | B   | C          |
| 94. A group or program meeting, such as Alateen, Smoke Enders, or a school support group | A  | B   | C          |
95. In your opinion, how likely is it that a student would find help at your school to *stop using* alcohol or other drugs?
- (A) Very likely
  - (B) Fairly likely
  - (C) Not likely
  - (D) Don't Know
96. Does your school have any programs to help students *stop using* alcohol or other drugs?
- (A) Yes
  - (B) No
  - (C) Don't Know



**APPENDIX B. CALIFORNIA STUDENT SURVEY**

97. About what was your grade point average in school in the past year?  
(Mark the letter or grade point average that is closest, or the grade you most often receive.)
- (A) A (3.5 or above)
  - (B) B (2.5 to 3.4)
  - (C) C (1.5 to 2.4)
  - (D) D (1 to 1.4)
  - (E) Below a D (less than 1)
  - (F) Don't know
98. If you are Asian American or Pacific Islander, which of the following ethnic groups do you primarily identify with? (Mark only one letter.)
- (A) Does not apply, I am not Asian American or Pacific Islander
  - (B) Asian Indian
  - (C) Cambodian
  - (D) Chinese
  - (E) Filipino
  - (F) Guamanian
  - (G) Hawaiian
  - (H) Japanese
  - (I) Korean
  - (J) Laotian
  - (K) Samoan
  - (L) Vietnamese
  - (M) Other Asian American or Pacific Islander
99. If you are Hispanic or Latin American, which of the following ethnic groups do you primarily identify with? (Mark only one letter.)
- (A) Does not apply, I am not Hispanic or Latin American
  - (B) Central American
  - (C) South American
  - (D) Cuban American
  - (E) Mexican American
  - (F) Puerto Rican American
  - (G) Other Hispanic American

**APPENDIX B. CALIFORNIA STUDENT SURVEY**

100. If you identify yourself as of *mixed race or ethnicity*, what are the main groups in your family background? (Mark all groups that apply.)
- (A) Does not apply
  - (B) American Indian or Native American
  - (C) Asian or Pacific Islander  
(for example, Chinese, Filipino, Japanese, Korean Cambodian, Vietnamese, Laotian, Asian Indian, or Samoan)
  - (D) Black or African American (non-Hispanic)
  - (E) Hispanic or Latin American  
(for example, Mexican, Mestizo, South American, Central American, Cuban, Puerto Rican, or Spanish)
  - (F) White (Caucasian/non-Hispanic)  
(for example, English, Irish, French, German, Scandinavian, Greek, or Russian)
  - (G) Other

***Thank You For Completing This Survey***

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